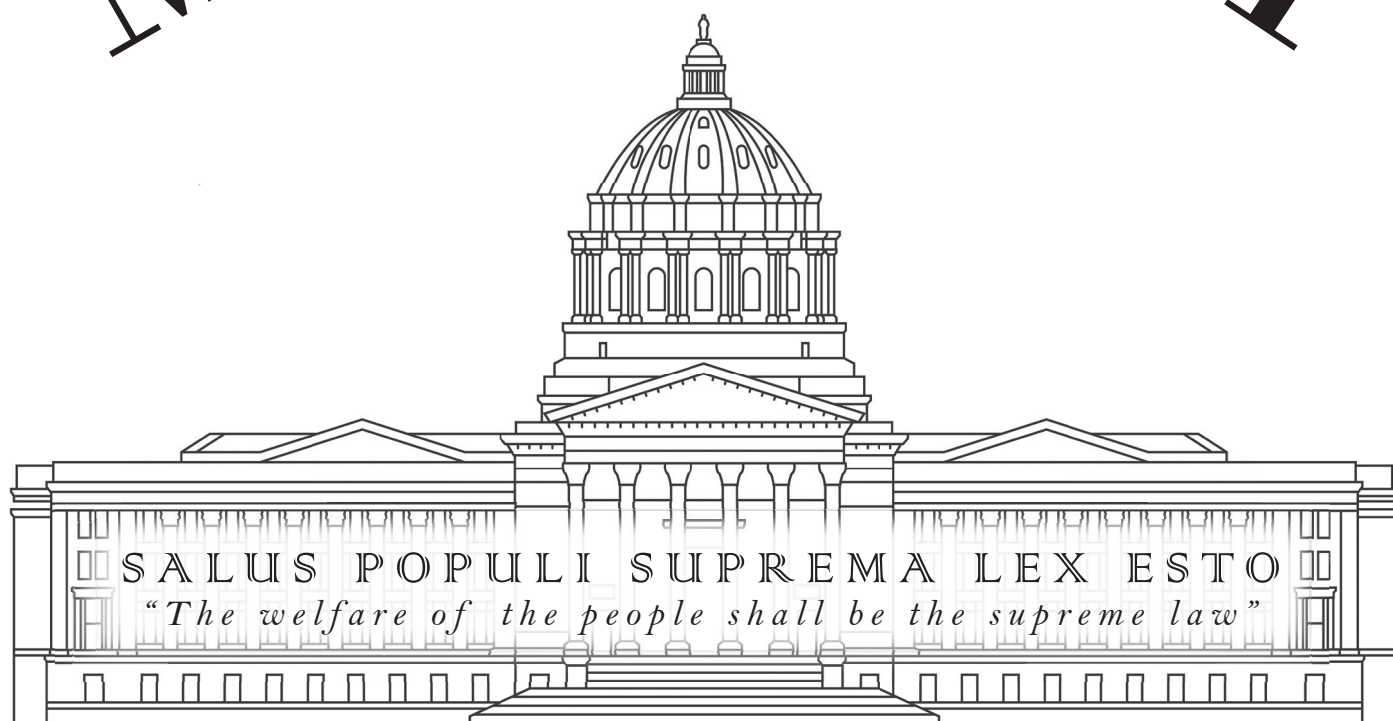


Volume 49, Number 7
Pages 431—534

April 1, 2024

MISSOURI



REGISTER

John R. Ashcroft  Secretary of State

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The *Missouri Register* is published semi-monthly by

SECRETARY OF STATE

John R. Ashcroft

Administrative Rules Division
James C. Kirkpatrick State Information Center
600 W. Main
Jefferson City, MO 65101
(573) 751-4015

EDITOR-IN-CHIEF

CURTIS W. TREAT

MANAGING EDITOR

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PUBLICATION SPECIALIST II

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EDITOR II

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ADMINISTRATIVE AIDE III

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MISSOURI



REGISTER

April 1, 2024

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January 17, 2025	February 18, 2025	February 28, 2025	March 30, 2025

Documents will be accepted for filing on all regular workdays from 8:00 a.m. until 5:00 p.m. We encourage early filings to facilitate the timely publication of the *Missouri Register*. Orders of Rulemaking appearing in the *Missouri Register* will be published in the *Code of State Regulations* and become effective as listed in the chart above. Advance notice of large volume filings will facilitate their timely publication. We reserve the right to change the schedule due to special circumstances. Please check the latest publication to verify that no changes have been made in this schedule. To review the entire year's schedule, please see the website at sos.mo.gov/adrules/pubsched.

HOW TO CITE RULES AND RSMO

RULES

The rules are codified in the *Code of State Regulations* in this system–

Title	CSR	Division	Chapter	Rule
3 Department	<i>Code of State Regulations</i>	10- Agency division	4 General area regulated	115 Specific area regulated

and should be cited in this manner: 3 CSR 10-4.115.

Each department of state government is assigned a title. Each agency or division in the department is assigned a division number. The agency then groups its rules into general subject matter areas called chapters and specific areas called rules. Within a rule, the first breakdown is called a section and is designated as (1). Subsection is (A) with further breakdown into paragraphs 1., subparagraphs A., parts (I), subparts (a), items I. and subitems a.

The rule is properly cited by using the full citation; for example, 3 CSR 10-4.115, NOT Rule 10-4.115.

Citations of RSMo are to the *Missouri Revised Statutes* as of the date indicated.

Code and Register on the Internet

The *Code of State Regulations* and *Missouri Register* are available on the Internet.

The *Code* address is sos.mo.gov/adrules/csr/csr

The *Register* address is sos.mo.gov/adrules/moreg/moreg

These websites contain rulemakings and regulations as they appear in the *Code* and *Registers*.

Rules appearing under this heading are filed under the authority granted by section 536.025, RSMo. An emergency rule may be adopted by an agency if the agency finds that an immediate danger to the public health, safety, or welfare, or a compelling governmental interest requires emergency action; follows procedures best calculated to assure fairness to all interested persons and parties under the circumstances; follows procedures which comply with the protections extended by the Missouri and the United States Constitutions; limits the scope of such rule to the circumstances creating an emergency and requiring emergency procedure, and at the time of or prior to the adoption of such rule files with the secretary of state the text of the rule together with the specific facts, reasons, and findings which support its conclusion that there is an immediate danger to the public health, safety, or welfare which can be met only through the adoption of such rule and its reasons for concluding that the procedure employed is fair to all interested persons and parties under the circumstances.

Rules filed as emergency rules may be effective not less than ten (10) business days after filing or at such later date as may be specified in the rule and may be terminated at any time by the state agency by filing an order with the secretary of state fixing the date of such termination, which order shall be published by the secretary of state in the Missouri Register as soon as practicable.

All emergency rules must state the period during which they are in effect, and in no case can they be in effect more than one hundred eighty (180) calendar days or thirty (30) legislative days, whichever period is longer. Emergency rules are not renewable, although an agency may at any time adopt an identical rule under the normal rulemaking procedures.

Amendment Text Reminder:

Boldface text indicates new matter.

[Bracketed text indicates matter being deleted.]

TITLE 13 – DEPARTMENT OF SOCIAL SERVICES

Division 70 – MO HealthNet Division

Chapter 10 – Nursing Home Program

EMERGENCY AMENDMENT

13 CSR 70-10.020 Prospective Reimbursement Plan for Nursing Facility and HIV Nursing Facility Services. The division is amending sections (11) and (12).

PURPOSE: This amendment provides for an increase to nursing facility and HIV nursing facility per diem reimbursement rates of ten dollars and zero cents (\$10.00) and an increase to the Value Based Purchasing per diem adjustments of eighty-seven (\$0.87) for qualifying facilities, effective for dates of service beginning July 1, 2023. These per diem adjustments correspond to the state fiscal year (SFY) 2024 appropriation for nursing facilities and was contingent upon approval by the Centers for Medicare and Medicaid Services (CMS).

EMERGENCY STATEMENT: The Department of Social Services (DSS), MO HealthNet Division (MHD), by rule and regulation, must define the reasonable costs, manner, extent, quantity, quality, charges, and fees of medical assistance provided to

MO HealthNet participants. The General Assembly included additional funds to nursing facilities' and HIV nursing facilities' reimbursements for SFY 2024. MHD is carrying out the General Assembly's intent by providing for an increase to nursing facility and HIV nursing facility per diem reimbursement rates of ten dollars and zero cents (\$10.00) and an increase to the Value Based Purchasing per diem adjustments of eighty-seven (\$0.87) for qualifying facilities, effective for dates of service beginning July 1, 2023. The per diem adjustments are necessary to ensure that payments for nursing facility and HIV nursing facility per diem rates are in line with the funds appropriated for that purpose. There are a total of four hundred eighty-four (484) nursing facilities and HIV nursing facilities currently enrolled in MO HealthNet that will receive a per diem increase to its reimbursement rate effective for dates of service beginning July 1, 2023. This emergency amendment will ensure payment for nursing facility and HIV nursing facility services to approximately twenty-two thousand (22,000) MO HealthNet participants in accordance with the appropriation authority. For the SFY 2024 payment to be made, MHD was required to submit a Medicaid State Plan Amendment (SPA) to the Centers for Medicare and Medicaid Services (CMS). CMS approved the SPA on December 18, 2023. This emergency amendment is necessary to protect the public health and welfare of MO HealthNet participants in nursing facilities and HIV nursing facilities. This emergency amendment is necessary to protect a government interest to reimburse nursing facilities and HIV nursing facilities as required by the General Assembly, and to provide MO HealthNet participants with quality nursing facility services. As a result, MHD finds an immediate danger to public health, safety, and/or welfare and a compelling governmental interest, which requires emergency action. MHD has a compelling government interest in providing continued cash flow for nursing facility and HIV nursing facility services. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. MHD believes this emergency amendment is fair to all interested persons and parties under the circumstances. A proposed amendment covering this same material will be published in the Missouri Register. This emergency amendment was filed February 21, 2024, effective March 6, 2024, and expires September 1, 2024.

(11) Prospective Rate Determination. The division will use the rate setting cost report described in (11)(I) to determine the nursing facility's prospective rate, as detailed in (11)(A)-(I) below.

(F) Special Per Diem Adjustments. Special per diem rate adjustments may be added to a qualifying facility's rate without regard to the cost component ceiling if specifically provided as described below.

1. Patient care incentive. Each facility with a prospective rate on or after July 1, 2022, shall receive a per diem adjustment equal to four and seventy-fifth percent (4.75%) of the facility's patient care per diem determined in paragraph (11)(A)1. subject to a maximum of one hundred thirty percent (130%) of the patient care median when added to the patient care per diem as determined in paragraph (11)(A)1. This adjustment will not be subject to the cost component ceiling of one hundred twenty percent (120%) for the patient care median.

2. Multiple component incentive. Each facility with a prospective rate on or after July 1, 2022, and which meets the following criteria shall receive a per diem adjustment:

A. If the sum of the facility's patient care per diem and ancillary per diem, as determined in subsections (11)(A) and (11)(B), is greater than or equal to seventy percent (70%), rounded to four (4) decimal places (.6985 would not receive

the adjustment) of the facility's total per diem, the adjustment is as follows:

Patient Care & Ancillary Percent of Total Rate	Incentive
< 70%	\$0.00
> or = 70% but < 75%	\$0.10
> or = 75% but < or = 80%	\$0.15
> 80%	\$0.20

B. A facility shall receive an additional incentive if it receives the adjustment in subparagraph (11)(F)2.A. and if the facility's Medicaid utilization percent is greater than eighty-five percent (85%), rounded to four (4) decimal places (.8485 would not receive the adjustment). The adjustment is as follows:

Medicaid Utilization Percent	Incentive
< 85%	\$0.00
> or = 85% but < 90%	\$0.10
> or = 90% but < 95%	\$0.15
> or = 95%	\$0.20

3. Value Based Purchasing (VBP) Incentive. Each facility with a prospective rate on or after July 1, 2022, and which meets the following criteria shall receive a per diem adjustment:

A. The facility shall receive a per diem adjustment for each Quality Measure (QM) Performance threshold that it meets, up to a maximum per diem adjustment of seven dollars (\$7.00). The threshold for each QM is based on national cut-points used by CMS in its Five Star Rating System. Each threshold is the maximum QM value a facility can have in order to receive the per diem adjustment. These thresholds are listed in Table A3 of the Five-Star Quality Rating System: Technical Users' Guide dated January 2017. The thresholds listed in Table A3 have been rounded to the nearest tenth for purposes of determining the VBP Incentive. Table A3 of the Five-Star Quality Rating System: Technical Users' Guide dated January 2017 is incorporated by reference and made a part of this rule as published by CMS and available at <https://dss.mo.gov/mhd/providers/nursing-home-reimbursement-resources.htm>. This rule does not incorporate any subsequent amendments or additions.

(I) **SFY 2023 QM Performance Measure table.** The facility's most current twelve- (12-) month rolling average QM value as of January 21, 2022 is used to determine the per diem adjustment(s) the facility qualified to receive for the rates effective July 1, 2022.

[(III)] The QM Performance Measure threshold, rounded to the nearest tenth, and per diem adjustments are as follows:

QM Performance	Threshold	Per Diem Adjustment
Decline in Late-Loss ADLs	< or = 10.0%	\$1.00
Decline in Mobility on Unit	< or = 8.0%	\$1.00

High-Risk Residents w/ Pressure Ulcers	< or = 2.7%	\$1.00
Anti-Psychotic Medications	< or = 6.8%	\$1.00
Falls w/ Major Injury	< or = 1.3%	\$1.00
In-Dwelling Catheter	< or = 1.1%	\$1.00
Urinary Tract Infection	< or = 1.9%	\$1.00

[(III)] Any revisions to the per diem adjustments shown in the above table will be included in 13 CSR 70-10.016, as set forth in (12)(A);]

(II) **SFY 2024 QM Performance Measure table.** Effective for dates of service beginning July 1, 2023, the QM Performance Measure per diem adjustments are as follows:

QM Performance	Threshold	Per Diem Adjustment
Decline in Late-Loss ADLs	< or = 10.0%	\$1.87
Decline in Mobility on Unit	< or = 8.0%	\$1.87
High-Risk Residents w/ Pressure Ulcers	< or = 2.7%	\$1.87
Anti-Psychotic Medications	< or = 6.8%	\$1.87
Falls w/ Major Injury	< or = 1.3%	\$1.87
In-Dwelling Catheter	< or = 1.1%	\$1.87
Urinary Tract Infection	< or = 1.9%	\$1.87

B. A VBP percentage will also be applied to the per diem adjustment for each facility that qualifies for a VBP Incentive. The VBP percentage will be determined by the total QM score calculated from the Five-Star Rating System scores for each of the eight (8) long-stay QMs, as follows:

(I) The eight (8) long-stay QMs included in the total QM score to determine the VBP percentage include the following:

- (a) Decline in Late-Loss ADLs;
- (b) Decline in Mobility on Unit;
- (c) High-Risk Residents w/ Pressure Ulcers;
- (d) Anti-Psychotic Medications;
- (e) Falls w/ Major Injury;
- (f) In-Dwelling Catheter;
- (g) Urinary Tract Infection; and
- (h) Physical Restraints;

(II) The facility's most current twelve- (12-) month rolling average QM value as of January 21, 2022, is used to determine the facility's QM Score and VBP Percentage for the rates effective July 1, 2022;

(III) For each QM value, the corresponding number of QM points will be determined from Table A3 of the Five-Star Quality Rating System: Technical Users' Guide dated January 2017;

(IV) The QM points for all of the QMs will be summed to determine the facility's total QM Score; and

(V) The VBP percentage for each scoring range is listed in the following table.

QM Scoring Tier	Minimum Score	VBP Percentage
1	600	100%
2	520	75%
3	440	50%
4	360	25%
5	0	0%

4. Mental Illness Diagnosis Add-On. Each facility with a prospective rate on or after July 1, 2022, and which meets the following criteria shall receive a per diem adjustment:

A. If at least forty percent (40%) of a facility's Medicaid participants have the following mental illness diagnosis, the facility shall receive a per diem adjustment of five dollars (\$5.00):

(I) Schizophrenia; **and**

(II) Bi-polar; **and**

(III) *Any revision to the Mental Illness Diagnosis Add-On reflected above in subparagraph (11)(F)4.A. will be included in 13 CSR 70-10.016, as set forth in subsection (12)(A)].*

(H) Semi-Annual and Annual Rate Updates. Each facility with a prospective rate on or after July 1, 2022, shall have its rate updated for the following items as described below:

1. Semi-Annual Acuity Adjustment for Patient Care Per Diem Rate. Each facility's patient care per diem rate will be adjusted semi-annually using a current Medicaid CMI. The patient care per diem rate will be adjusted effective for dates of service beginning January 1 and July 1 of each year. The Medicaid CMI will be updated based on the facility's average Medicaid CMI using the RUGS IV 48 group model classifications from the two (2) preceding quarterly calculations. The allowable patient care cost per day determined in paragraph (11)(A)1. shall be adjusted by the applicable Medicaid CMI and shall be the facility's patient care per diem to be included in the facility's total prospective per diem rate, effective each January 1 and July 1. The patient care and multiple component incentives will not be updated based on the adjusted patient care per diem. The facility's prospective rate shall continue to include the patient care and multiple component incentives initially determined for the prospective rate. The applicable Medicaid CMI are as follows:

A. Effective for dates of service beginning January 1 of each year, each facility's Medicaid CMI will be updated using the average of the preceding July 1 and October 1 quarterly Medicaid CMI calculations; and

B. Effective for dates of service beginning July 1 of each year, each facility's Medicaid CMI will be updated using the average of the preceding January 1 and April 1 quarterly Medicaid CMI calculations;

2. Semi-Annual Adjustment for VBP Incentive. Each facility's QM Performance data shall be re-evaluated semi-annually and the per diem add-on rate shall be adjusted accordingly. The VBP will be recalculated effective for dates of service beginning January 1 and July 1 of each year. The QM Performance data will be updated based on the most current data available as of November 15 for the January 1 rate adjustment and as of May 15 for the July 1 rate adjustment. A facility must meet the criteria set forth in paragraph (11)(F)3. each period and will lose any per diem adjustments for which it does not continue to qualify;

3. Semi-Annual Adjustment for Mental Illness Diagnosis Add-On. Each facility's Mental Illness Diagnosis data shall

be re-evaluated semi-annually and the per diem add-on rate shall be adjusted accordingly. The Mental Illness Diagnosis will be recalculated effective for dates of service beginning January 1 and July 1 of each year. The Mental Illness Diagnosis data will be updated based on the most current data available as of November 15 for the January 1 rate adjustment and as of May 15 for the July 1 rate adjustment. A facility must meet the criteria set forth in paragraph (11)(F)4. each period and will lose any per diem adjustments for which it does not continue to qualify;

4. Annual Capital Rate Update. Each facility's capital rate will be recalculated annually by updating the rental value portion of the capital rate. The capital rate will be recalculated at the beginning of each state fiscal year (SFY), effective for dates of service beginning July 1, as follows:

A. The total facility size will be updated each year for any increases or decreases in licensed beds and capital expenditures that qualify as bed equivalencies, as follows:

(I) For SFY 2024, effective for dates of service beginning July 1, 2023, the total facility size will be updated using information from the 2020 and 2021 cost reports; and

(II) For SFY 2025 forward, the total facility size will be updated using the information from the third (3rd) prior year cost report relative to the SFY (i.e., for SFY 2025, the facility size will be updated using 2022 cost report data.);

B. The weighted average age of the facility shall be updated each year. The age shall be calculated from the year coinciding with the latest cost report used to update the facility size above in subparagraph (11)(A)1.A. (i.e., the age for SFY 2024 shall be calculated from 2021, the age for SFY 2025 shall be calculated from 2022, etc.); and

C. The asset value shall be updated each SFY. The asset value shall be updated for the year coinciding with the latest cost report used to update the facility size above in subparagraph (11)(A)1.A. (i.e., for SFY 2024 the 2021 asset value shall be used, for SFY 2025 the 2022 asset value shall be used, etc.); and

5. A facility's prospective rate shall be increased or decreased based upon the semi-annual and annual rate adjustments but the rate shall not be decreased below the facility's June 30, 2022, prospective rate. *[A facility's June 30, 2022, prospective rate shall be adjusted for any global per diem adjustments granted to nursing facilities as set forth in subsection (12)(A). Semi-annual and annual rate adjustments shall not decrease a facility's prospective rate below the June 30, 2022, prospective rate that has been adjusted for any global per diem adjustments for the applicable effective date].*

(I) Rate Setting Cost Report.

1. A facility with a valid Medicaid participation agreement and a prospective rate in effect on June 30, 2022, shall have its prospective rate rebased on its 2019 cost report. If a facility does not have a 2019 cost report, the next available cost report year shall be used as the rate setting cost report.

2. A nursing facility never previously certified for participation in the MO HealthNet program that originally enters the MO HealthNet program after June 30, 2022, shall receive an interim rate, as defined in subsection (4)(JJ), effective on the initial date of MO HealthNet certification. A prospective rate shall be determined in accordance with this regulation from the audited facility fiscal year cost report which covers the second full twelve- (12-) month fiscal year following the facility's initial date of MO HealthNet certification. This prospective rate shall be retroactively effective to the first day of the facility's second full twelve- (12-) month fiscal year and shall replace the interim rate for dates of service beginning

on the first day of the facility's second full twelve- (12-) month fiscal year. The following items shall be updated annually and shall be used in determining the prospective rate:

A. Ceilings. *[The patient care, ancillary, and administration cost component ceilings shall be updated for any global per diem adjustments as set forth in subsection (12)(A). The effective date of the updated ceilings shall be the effective date of the global per diem adjustment.]* The ceiling used to determine the prospective rate shall be the ceiling in effect at the beginning of the rate setting period;

B. Asset Value. The asset value shall be updated annually as set forth in subsection (4)(E). The asset value for the year coinciding with the rate setting cost report year (i.e., the end of the cost report period) shall be used; and

C. Age of Beds and Bed Equivalencies. The age of beds shall be calculated by subtracting the year the beds were originally licensed from the year coinciding with the rate setting cost report year (i.e., the end of the cost report period). The age of bed equivalencies shall be calculated by subtracting the year the capital expenditures were made from the year coinciding with the rate setting cost report (i.e., the end of the rate setting cost report period).

3. A facility with a valid Medicaid participation agreement in effect after June 30, 2022, which either voluntarily or involuntarily terminates its participation in the Medicaid Program and which reenters the Medicaid Program within two (2) years, shall have its prospective rate established as the rate in effect on the day prior to the date of termination from participation in the program plus rate adjustments which may have been granted with effective dates subsequent to the termination date but prior to reentry into the program as described in subsection (12) (A). This prospective rate shall be effective for service dates on and after the effective date of the reentry following a voluntary or involuntary termination.

(12) Adjustments to the Reimbursement. Subject to the limitations prescribed elsewhere in this regulation, a facility's reimbursement rate may be adjusted as described in this section, *[13 CSR 70-10.016,]* and 13 CSR 70-10.017.

(A) Global Per Diem Rate Adjustments. A facility with either an interim rate or a prospective rate may qualify for the global per diem rate adjustments as set forth *[in 13 CSR 70-10.016 Global Per Diem Adjustments to Nursing Facility and HIV Nursing Facility Reimbursement Rates.]* below:

1. *[Global per diem rate adjustments, other than per diem adjustments for the VBP Incentive per diems or the Mental Illness Diagnosis Add-On per diem, shall be allocated, and added to, the patient care, ancillary, and administration cost component ceilings based on the ceiling in effect at the time the global per diem adjustment is granted, unless the adjustment is directly attributable to a specific cost component(s). If the adjustment is directly attributable to a specific cost component(s), it shall be added to the specified cost component ceiling.]*

2. *The cost component ceilings will not be adjusted by global per diem adjustments made to the VBP Incentive per diems or the Mental Illness Diagnosis Add-On per diem.]* SFY 2024 Per Diem Rate Adjustment.

A. Effective for dates of service beginning July 1, 2023, facilities with either an interim rate or a prospective rate in effect on July 1, 2023, shall be granted an increase to their per diem rate of ten dollars and zero cents (\$10.00);

B. Effective for dates of service beginning July 1, 2023, and ending December 31, 2023, the rate to which the SFY 2024 per diem adjustment of ten dollars and zero cents

(\$10.00) shall be added is the facility's July 1, 2023, rate after all rate setting procedures have been applied, including adjustments for the Semi-Annual and Annual Rate Updates set forth in subsection (11)(H) that are effective July 1, 2023, and after selecting the greater of the Preliminary Per Diem or the June 30, 2022 prospective rate (excluding NFRA), and adding the NFRA per diem, VBP incentive, and MI add-on effective July 1, 2023. The increased VBP per diem adjustments effective July 1, 2023, detailed above in (11) (F)3.A.(II) and shown in the accompanying QM Performance Measure table shall be used in this calculation. The SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) is not added to the facility's June 30, 2022, prospective rate and is not allocated and added to the cost component ceilings in performing this calculation.

C. Subsequent Semi-Annual and Annual Rate Updates. Effective for dates of service beginning with the effective date of the rate change (i.e., January 1 or July 1) and ending on the day prior to the effective date of the next rate change (i.e., December 31 or June 30), the SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) will be added to the facility's rate after all rate setting procedures have been applied, including the Semi-Annual and Annual Rate Updates set forth in subsection (11)(H) that are effective on the date of the rate change, and after selecting the greater of the Preliminary Per Diem or the June 30, 2022, prospective rate (excluding NFRA), and adding the NFRA per diem, VBP incentive, and MI add-on effective on the date of the rate change. The increased VBP per diem adjustments effective July 1, 2023, detailed above in (11)(F)3.A.(II) and shown in the accompanying QM Performance Measure table shall be used in this calculation. The SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) is not added to the facility's June 30, 2022, prospective rate and is not allocated and added to the cost component ceilings in performing this calculation. The SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) shall only be included in the rate once for each effective date, it is not a cumulative adjustment from one effective date to the next.

D. New nursing facilities. For new nursing facilities never previously certified for participation in the MO HealthNet program that need to have their prospective rate determined as set forth in subsection (11)(I), the SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) will be added to the facility's rate beginning July 1, 2023, in the same manner as detailed above in (12)(A)1.B and (12)(A)1.C.

AUTHORITY: sections 208.153, 208.159, 208.201, and 660.017, RSMo 2016. Emergency rule filed May 16, 2023, effective May 31, 2023, expired Nov. 26, 2023. Original rule filed May 16, 2023, effective Dec. 30, 2023. Emergency amendment filed Feb. 21, 2024, effective March 6, 2024, expires Sept. 1, 2024. Amended: Filed Feb. 21, 2024. A proposed amendment covering this same material is published in this issue of the Missouri Register.

PUBLIC COST: This emergency amendment will cost state agencies or political subdivisions approximately ninety-three million ninety-six thousand seven hundred twenty-nine dollars (\$93,096,729) in the time the emergency is effective.

PRIVATE COST: This emergency amendment will not cost private entities more than five hundred dollars (\$500) in the time the emergency is effective.

**FISCAL NOTE
PUBLIC COST**

- I. Department Title:** Title 13 - Department of Social Services
Division Title: Division 70 - MO HealthNet Division
Chapter Title: Chapter 10 - Nursing Home Program

Rule Number and Name:	13 CSR 70-10.020 Prospective Reimbursement Plan for Nursing Facility and HIV Nursing Facility Services
Type of Rulemaking:	Emergency Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Social Services MO HealthNet Division	Estimated Cost in the time the Emergency is effective = \$93,096,729
Non-State Government Owned Nursing Facilities (32)	No estimated cost of compliance.

III. WORKSHEET

Description	Nursing Facility Rate Increase	Hospice Nursing Home Room & Board	Total Impact
Total Annual Estimated Cost:			
Estimated Medicaid Days – SFY 2024	7,928,928	668,856	
Per Diem Increase	\$10.87	\$10.33	
Estimated Impact – SFY 2024	\$86,187,447	\$6,909,282	\$93,096,729

IV. ASSUMPTIONS

Impact to Department of Social Services, MO HealthNet Division: The above impact to DSS, MHD was calculated using the following assumptions:

Nursing Facilities and HIV Nursing Facilities:

This amendment provides for a \$10.00 per diem increase to all nursing facility and HIV nursing facility per diem reimbursement rates and a \$0.87 per diem increase in the Value Based Purchasing (VBP) incentives for qualifying facilities for a total per diem increase of \$10.87.

Hospice:

Hospice providers will be impacted by this amendment because reimbursement for hospice services provided in nursing facilities (i.e., Hospice Nursing Home Room and Board) is based on the nursing facility per diem rate. MHD conducted a fiscal analysis using 13 CSR 70-50.010

to estimate the impact to hospice. Please note this is an estimated analysis with the assumption of hospice appropriation authority.

Hospice Nursing Home Room and Board services are reimbursed 95% of the nursing facility per diem rate. The per diem increase to nursing facility rates of \$10.87 computes to a per diem increase to hospice reimbursement rates of \$10.33 ($\$10.87 \times 95\%$).

Estimated Paid Days:

Nursing Facility –

The estimated nursing facility days for SFY 2024 are based on the SFY 2023 days trended by approximately 1%.

Hospice –

The estimated hospice days for SFY 2024 are based on the hospice days provided in nursing facilities for the last two SFYs.

Home and Community Based Services (HCBS):

HCBS provided on a monthly basis are limited to a percentage of the average monthly nursing facility payment (referred to as the HCBS cost cap). The HCBS cost cap for a given SFY is based on the average monthly nursing facility payments for the 12 months ending in April of the previous SFY. Therefore, the per diem increase to nursing facility rates of \$10.87 effective for dates of service beginning July 1, 2023 will not impact the HCBS cost cap for SFY 2024 but may impact the HCBS cost cap for SFY 2025. For SFY 2025, the HCBS cost cap is estimated to increase by approximately 8% as a result of this amendment. This may increase the amount of services, and the payments, for MO HealthNet participants that are at the cap.

Impact to Non-State Government Owned Nursing Facilities (32): The amendment will have no cost of compliance for Medicaid enrolled non-state government owned nursing facilities because it will have a positive fiscal impact. This amendment provides for a per diem increase to nursing facility and HIV nursing facility per diem reimbursement rates of \$10.87 effective for dates of service beginning July 1, 2023.

**TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 10 – Nursing Home Program**

EMERGENCY AMENDMENT

13 CSR 70-10.120 Reimbursement for Nurse Assistant Training. The division is amending sections (1), (2), (3), and (4).

PURPOSE: This amendment updates the maximum allowable reimbursement for nurse assistant training to one thousand five hundred dollars (\$1,500) per person and updates other outdated terms and references.

*EMERGENCY STATEMENT: The Department of Social Services (DSS), MO HealthNet Division (MHD), by rule and regulation, must define the reasonable costs, manner, extent, quantity, quality, charges, and fees of medical assistance provided to MO HealthNet participants. The General Assembly included additional funds to nursing facilities' and HIV nursing facilities' reimbursements for nurse assistant training (NAT) in SFY 2024. MHD is carrying out the General Assembly's intent by providing for an increase in the maximum allowable reimbursement to nursing facilities and HIV nursing facilities for NAT to one thousand five hundred dollars (\$1,500) per person. The increase is necessary to ensure that payments for NAT for nursing facilities and HIV nursing facilities are in line with the funds appropriated for that purpose. There are a total of four hundred eighty-four (484) nursing facilities and HIV nursing facilities currently enrolled in MO HealthNet that will receive an increase to its NAT reimbursement in SFY 2024. This emergency amendment will ensure payment for nursing facility and HIV nursing facility services to approximately twenty-two thousand (22,000) MO HealthNet participants in accordance with the appropriation authority. For the SFY 2024 payment to be made, MHD was required to submit a Medicaid State Plan Amendment (SPA) to the Centers for Medicare and Medicaid Services (CMS). CMS approved the SPA on December 18, 2023. This emergency amendment is necessary to protect the public health and welfare of MO HealthNet participants in nursing facilities and HIV nursing facilities. This emergency amendment is necessary to protect a government interest to reimburse nursing facilities and HIV nursing facilities as required by the General Assembly, and to provide MO HealthNet participants with quality nursing facility services. As a result, MHD finds an immediate danger to public health, safety, and/or welfare and a compelling governmental interest, which requires emergency action. MHD has a compelling government interest in providing continued cash flow for nursing facility and HIV nursing facility services. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended by the **Missouri** and **United States Constitutions**. MHD believes this emergency amendment is fair to all interested persons and parties under the circumstances. A proposed amendment covering this same material will be published in the **Missouri Register**. This emergency amendment was filed February 26, 2024, effective March 11, 2024, and expires September 6, 2024.*

(1) Definitions.

(D) "Cost report" is the Financial and Statistical Report for Nursing Facilities, required attachments, and all worksheets supplied by the division for this purpose per 13 CSR 70-10.015, **effective January 1, 1995, through June 30, 2022, and 13 CSR 70-10.020, effective beginning July 1, 2022**. The cost report details the cost of rendering both covered and noncovered

services for the fiscal reporting period in accordance with the procedures prescribed by the division, and on forms provided by and/or approved by the division.

(G) "Division," unless otherwise specified, refers to the Department of Social Services, MO HealthNet Division that is charged with administration of *[Missouri's Medical Assistance]* **MO HealthNet** (Medicaid) Program.

(H) "Facility fiscal year" is a facility's twelve- (12-) month fiscal reporting period *[covering the same twelve- (12-) month period as its federal tax year]*.

(L) "Patient day" is the period of service rendered to a patient between the census-taking hour on two (2) consecutive days. Census shall be taken in all facilities at midnight each day and a census log maintained in each facility for documentation purposes. Patient day includes the allowable temporary leave-of-absence days per 13 CSR 70-10.015(5)(D), **effective January 1, 1995, through June 30, 2022, and 13 CSR 70-10.020 (5)(C), effective beginning July 1, 2022**, and hospital leave days per 13 CSR 70-10.070. The day of discharge is not a patient day for reimbursement purposes unless it is also the day of admission.

(M) "Provider or facility" is a nursing facility with a valid Medicaid participation agreement with the Department of Social Services for the purpose of providing nursing facility services to Title XIX-eligible *[recipients]* participants.

(2) General Principles.

(A) Provisions of this reimbursement plan shall apply only to nursing facilities with valid provider agreements certified by the Department of Social Services, Missouri Medicaid Audit and Compliance (MMAC) for participation in the *[Missouri Medical Assistance]* **MO HealthNet** (Medicaid) Program.

(3) Reimbursement for Nurse Assistants Employed at the Time of Training. If a nurse assistant is employed at a nursing facility and then passes an approved nurse assistant training and competency evaluation program, the division will reimburse a facility if all the following criteria are met:

(C) The following reimbursement amounts will be prorated based on Medicaid utilization:

1. *[Three hundred sixty-five dollars (\$365)]* **One thousand five hundred dollars (\$1,500)** for a nurse assistant completing the entire basic course (all lesson plans, seventy-five (75) hours classroom training, and one hundred (100) hours on-the-job training) and passing the final exam^[;], **as follows:**

Classroom Training	\$600
On-the-Job Training	\$575
Textbook and Supplies	\$200
Written Test	\$30
Skills Test	\$95
Total Allowable to be Prorated on Medicaid Utilization	\$1,500

2. A percentage of the *[three hundred sixty-five dollars (\$365)]* **one thousand five hundred dollars (\$1,500)** for nurse assistants who only complete a portion of the lesson plans and pass the final exam will be paid. The percentage will be based on how many lesson plans were completed. For example:

If no on-the-job training was provided, and if only lesson plans 1, 2, 4, 5, 6, 8, 9, 10, 11, 12, 41, 42, and 43 were completed, the percentage of the *[\$365]* **\$1,500** allowable would be:

[\$ 34.50 classroom training

$((18.36/\text{hr} \times 75 \text{ hrs})/10) = \138
 $\$138 \times 18.75 \text{ hours}/75 \text{ hrs} = \34.50
 $\$ 0.00 \text{ on-the-job training (0 of 100 hours)}$
 $\$ 30.00 \text{ textbook and supplies}$
 $\$ 50.00 \text{ testing fee}$
 $\$ 25.00 \text{ certification fee}$
 $\$139.50 \text{ allowable to be prorated on Medicaid utilization}]$

Classroom Training (\$600 x 18.75 hours/75 hours)	\$150
On-the-Job Training	\$0
Textbook and Supplies	\$200
Written Test	\$30
Skills Test	\$95
Total Allowable to be Prorated on Medicaid Utilization	\$475

3. *[Seventy-five dollars (\$75)]* **One hundred twenty-five dollars (\$125)** for nurse assistants who do not complete any lesson plans through a challenge and pass the final exam;

(4) Reimbursement for Nurse Assistants Not Yet Employed at the Time of Training. If a nurse assistant is not employed at a nursing facility and that individual pays for the nurse assistant training and competency evaluation program, the division will reimburse a facility if all the following criteria are met:

(F) The division will prorate costs based on Medicaid utilization as follows:

1. *[Three hundred sixty-five dollars (\$365)]* **One thousand five hundred dollars (\$1,500)** for a nurse assistant completing the entire basic course (all lesson plans, seventy-five (75) hours classroom training, and one hundred (100) hours on-the-job training) and passing the final exam;

2. A percentage of the *[three hundred sixty-five dollars (\$365)]* **one thousand five hundred dollars (\$1,500)** for nurse assistants who only complete a portion of the lesson plans and pass the final exam. The percentage will be based on how many lesson plans were completed. See paragraph (3)(C)2. of this regulation; and

3. *[Seventy-five dollars (\$75)]* **One hundred twenty-five dollars (\$125)** for nurse assistants who do not complete any lesson plans through a challenge process and pass the final exam; and

AUTHORITY: sections 208.153, 208.159, 208.201, and 660.017, RSMo 2016, and section 208.152, RSMo Supp. [2018] 2023. Original rule filed May 30, 1995, effective Dec. 30, 1995. For intervening history, please consult the Code of State Regulations. Emergency amendment filed Feb. 26, 2024, effective March 11, 2024, expires Sept. 6, 2024. A proposed amendment covering this same material is published in this issue of the Missouri Register.

PUBLIC COST: This emergency amendment will cost state agencies or political subdivisions approximately two million three hundred eighty-three thousand one hundred twenty-four dollars (\$2,383,124) in the time the emergency is effective.

PRIVATE COST: This emergency amendment will not cost private entities more than five hundred dollars (\$500) in the time the emergency is effective.

**FISCAL NOTE
PUBLIC COST**

- I. Department Title:** Title 13 - Department of Social Services
Division Title: Division 70 - MO HealthNet Division
Chapter Title: Chapter 10 - Nursing Home Program

Rule Number and Name:	13 CSR 70-10.120 Reimbursement for Nurse Assistant Training
Type of Rulemaking:	Emergency Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Social Services MO HealthNet Division	Estimated Cost in the time the Emergency is effective = \$2,383,124
Non-State Government Owned Nursing Facilities (32)	No estimated cost of compliance.

III. WORKSHEET

NAT Reimbursement Increase – Fiscal Impact

Estimated Number of CNAs	3,180
Average Increase in NAT Reimbursement per CNA	<u>\$749.41</u>
Estimated Impact	<u><u>\$2,383,124</u></u>

IV. ASSUMPTIONS

Impact to Department of Social Services, MO HealthNet Division: The above impact to DSS, MHD was calculated using the following assumptions:

Nursing Facilities and HIV Nursing Facilities:

This emergency amendment provides for an increase in the maximum allowable reimbursement to nursing facilities for nurse assistant training to one thousand five hundred dollars (\$1,500) per person. The additional reimbursement is for increases in costs associated with the training, textbooks, supplies, testing, and certification of Certified Nursing Assistants (CNAs).

Impact to Non-State Government Owned Nursing Facilities (32): The amendment will have no cost of compliance for Medicaid enrolled non-state government owned nursing facilities because it is expected to have a positive fiscal impact.

TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES**Division 30 – Division of Regulation and Licensure****Chapter 40 – Comprehensive Emergency Medical Services Systems Regulations****EMERGENCY RULE****19 CSR 30-40.810 Ground Ambulance Transport of Patients to Locations That Are Not Hospitals**

PURPOSE: This rule establishes training and transport requirements for ground ambulances to transport patients to Missouri Department of Mental Health designated behavioral health crisis centers and other locations for those patients who do not require transport to a hospital and whose health needs can be met by behavioral health crisis centers or these other locations where patients are transported.

EMERGENCY STATEMENT: This emergency rule establishes training and transport requirements for ground ambulances to transport patients to Missouri Department of Mental Health designated behavioral health crisis centers and other locations for those patients who do not require transport to a hospital and whose health needs can be met by behavioral health crisis centers or other locations where patients are transported. The Missouri Department of Mental Health filed 9 CSR 30-7.010 on November 2, 2022, which created regulations for behavioral health crisis centers. Regulation 9 CSR 30-7.010 became effective on June 30, 2023. The purpose of these behavioral health crisis centers is to interrupt and/or ameliorate a behavioral health crisis experience with the goal of symptom reduction, observation, stabilization, and restoration to a previous level of functioning for the individuals being served. Currently, there are eighteen (18) behavioral health crisis centers located throughout Missouri with six (6) planned expansion locations. These behavioral health crisis centers provide an alternative location for emergency medical services “EMS” and law enforcement to transport individuals experiencing a behavioral health crisis who do not require hospitalization/a level of medical care that only hospitals can provide. By transporting these individuals to behavioral health crisis centers, these patients can receive individualized services to stabilize their immediate crisis, which may include linking the individual to additional treatment services, for further evaluation and/or to behavioral health services. EMS and hospitals in Missouri are extremely busy and understaffed in many areas of Missouri. This rule encourages EMS to consider alternative transport to behavioral health crisis centers and other locations to provide more individualized services for individuals seeking assistance by EMS who do not require a hospital level of care and who can benefit from these individualized services to meet their immediate crisis needs and a linkage to other services for long-term treatment. This rule also provides a framework for EMS to follow when considering transport to behavioral health crisis centers, so that EMS can get reimbursed for transport to behavioral health crisis centers by Medicaid in the future. This emergency rule is necessary to protect a compelling governmental interest to reduce the repetitive calls to EMS that strain the emergency system from individuals who do not necessarily require a hospital level of care, but who require individualized services that behavioral health crisis centers and other locations can better meet the individuals’ immediate and long-term needs and promote the individuals’ health and well-being. As a result, the Department of Health and Senior Services finds a compelling

governmental interest, which requires this emergency action. A proposed rule, which covers the same material, is published in this issue of the *Missouri Register*. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended in the *Missouri* and *United States Constitutions*. The Department of Health and Senior Services believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency rule was filed February 26, 2024, becomes effective March 11, 2024, and expires September 06, 2024.

(1) As used in this rule, the following terms and phrases shall mean:

(A) Advanced emergency medical technician (also known as Emergency Medical Technician-Intermediate) - the mid-level of licensure of licensed emergency medical services’ personnel who meet the requirements of 19 CSR 30-40.342(5);

(B) Advanced life support shall mean an advanced level of care as provided to the adult and pediatric patient when a patient is in a more critical condition and a paramedic is required to assist in the treatment of the patient during transport by an ambulance;

(C) Basic life support shall mean a basic level of care, as provided to the adult and pediatric patient where only emergency medical technicians are on ambulances during transport;

(D) BHCC shall mean Behavioral Health Crisis Centers designated by the Missouri Department of Mental Health;

(E) Department shall mean the Missouri Department of Health and Senior Services;

(F) Emergency Medical Technician means the lowest level of licensure of licensed emergency medical services’ personnel who meet the requirements in 19 CSR 30-40.342(2);

(G) Ground ambulance services shall mean ambulance services licensed under 19 CSR 30-40.309;

(H) Hospital shall mean the definition of hospital in section 197.020, RSMo or a hospital operated by the state of Missouri;

(I) Medical director shall mean the medical director of an ambulance service as required by 19 CSR 30-40.303; and

(J) Paramedic means the highest level of licensure of licensed emergency medical services’ personnel who meet the requirements in 19 CSR 30-40.342(4).

(2) Transport of patients to locations, which are not hospitals, following a request for emergency care.

(A) Ground ambulance services may transport patients to locations that are not hospitals, such as BHCCs in Missouri, following a request for emergency care.

1. Ground ambulance services shall have written transportation protocols that allow ground ambulance services to transport to locations that are not hospitals, such as BHCCs in Missouri; or

2. Licensed emergency medical services personnel for ground ambulance services shall receive physician orders for approval to transport patients to locations that are not hospitals, such as BHCCs in Missouri.

3. Ground ambulance services shall transport patients to hospitals if patients require a level of care that only the hospitals can provide. This includes transporting behavioral health patients to hospitals who present with a likelihood of serious harm to themselves or others as the term “likelihood of serious harm” is defined under section 632.005, RSMo, or who present as significantly incapacitated by alcohol or drugs.

4. Ground ambulance services shall have a working relationship with the BHCCs and other providers of locations

that they transport patients to that are not hospitals. Ground ambulance services shall understand the care that BHCCs and these other providers are able to give to patients, so patients are transported to an appropriate location in which the provider can provide the services that the patients require.

5. Ground ambulance services shall not transport patients to freestanding emergency departments unlicensed by the department, which are separate from the main hospital, when the patients require a hospital level of care, or when the patients do not require a hospital level of care and require a lesser level of care. Patients shall be transported to the emergency department located in the main hospital when the patients require a hospital level of care.

6. Ground ambulance services shall transport trauma, stroke and ST-elevation myocardial infarction (STEMI) patients to the appropriate department designated trauma, stroke or STEMI centers as set forth in the ground ambulance services' department approved community plan as allowed in 19 CSR 30-40.770 or in accordance with the department's transport protocols in 19 CSR 30-40.790 and 19 CSR 30-40.792.

(B) When providing services to patients transported to locations that are not hospitals following a request for emergency care, licensed emergency medical services personnel for ground ambulance services shall follow written medical protocols, physician orders to provide medical care, or orders from qualified health care professionals who have collaborative practice arrangements with physicians and are allowed under Missouri law and their collaborative practice arrangement to dispense or prescribe drugs and provide treatment. Paramedics for the ground ambulance services evaluating patients do not have to be on the ambulance crew that transports patients. Paramedics for the ground ambulance services can arrive on the scene to evaluate the patient and the patient may be transported to the location, which is not a hospital, with a basic life support ambulance staffed by emergency medical technicians and/or advanced emergency medical technicians if the patient does not require advanced life support care. Patients shall be transported by advanced life support ambulances or basic life support ambulances based on the patients' care needs.

(C) Licensed ground ambulance service personnel who evaluate and transport patients to facilities providing mental health services that are not hospitals, such as BHCCs in Missouri, shall be trained by the ground ambulance service or other providers on evaluating and caring for patients with mental health concerns. This training may include ground ambulance service personnel attending and completing the Missouri Crisis Intervention Team forty (40) hour course discussed in section 190.147, RSMo.

(D) Written transportation and medical protocols set forth in (2)(A) and (2)(B) shall be approved by the medical director of the service.

(E) Ground ambulance services shall conduct training and activities with the services' personnel to ensure written transportation protocols and medical protocols set forth in (2)(A) and (2)(B) are properly implemented and followed.

(F) Ground ambulance services shall evaluate the written transportation and medical protocols set forth in (2)(A) and (2)(B) to ensure the protocols are being properly implemented and followed by the services' personnel during a review of these transports through the services' quality improvement program.

effective March 11, 2024, expires Sept. 6, 2024. A proposed rule covering this same material is published in this issue of the Missouri Register.

PUBLIC COST: This emergency rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the time the emergency is effective.

PRIVATE COST: This emergency rule will not cost private entities more than five hundred dollars (\$500) in the time the emergency is effective.

The Secretary of State shall publish all executive orders beginning January 1, 2003, pursuant to section 536.035.2, RSMo.

EXECUTIVE ORDER
24-03

WHEREAS, I have been advised by the Director of the State Emergency Management Agency that the State of Texas is requesting assistance under the Emergency Management Assistance Compact (EMAC) to support the State of Texas with border operations; and

WHEREAS, the State of Texas requests assistance from the Missouri National Guard and Missouri State Highway Patrol to support the combined statewide operations along the 1,250 miles of the Texas/Mexico border by supplementing essential resources and capabilities, beginning on March 1, 2024, and continuing; and

WHEREAS, on February 13, 2024, I directed the Missouri National Guard and Missouri State Highway Patrol to initiate efforts to comply with the State of Texas's request pursuant to the EMAC; and

WHEREAS, the EMAC is designed to protect the safety and welfare of the citizens in the affected participating EMAC states; and

WHEREAS, illegal crossings from Mexico into the United States of America have significant public safety and welfare impacts for the citizens of Missouri and the entire country, including the affected states within the EMAC; and

WHEREAS, protection of the safety and welfare of the citizens in the affected communities requires invoking the provisions of Section 44.415, RSMo, which provides for emergency mutual aid with other states, and Section 41.480, RSMo, which authorizes the Governor to call out the organized militia as he deems necessary to provide emergency relief to a distressed area in the event of an actual or threatened public catastrophe creating conditions of distress or hazard to public health and safety; and

WHEREAS, invoking the provisions of Sections 44.100 and 44.110, RSMo, is required to ensure the safety and welfare of the people of Missouri and to activate the resources necessary to keep Missourians safe.

NOW, THEREFORE, I, MICHAEL PARSON, GOVERNOR OF THE STATE OF MISSOURI, by virtue of the authority vested in me by the Constitution and laws of the State of Missouri, including Sections 44.100 and 44.110, RSMo, do hereby declare that a State of Emergency exists in the State of Missouri. This State of Emergency is limited solely to providing resources in support of securing the Texas/Mexico border. I further declare, under Sections 44.415 and 41.480, RSMo, that the State of Missouri will respond to the EMAC request by the State of Texas and provide the resources necessary to assist in securing the Texas/Mexico border. I hereby direct the Missouri State Emergency Management Agency to activate the EMAC plan, and I further authorize the use of the Missouri National Guard and Missouri State Highway Patrol to provide support to the State of Texas.

I further order, pursuant to Sections 41.480 and 41.690, RSMo, the Adjutant General of the State of Missouri, or his designee, to forthwith call and order into active service such portions of the organized militia as he deems necessary to aid the executive officials of Missouri, to protect life and property, and it is further directed that the Adjutant General or his designee, and through him, the commanding officer of any unit or other organization of such organized militia so called into active service take such action and employ such equipment as may be necessary in support of civilian authorities, and provide such assistance as may be authorized and directed by the Governor of this State.

I further authorize state agencies to provide assistance as needed.

This Order shall remain in effect until June 13, 2024, unless extended in whole or in part.

IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Missouri, in the City of Jefferson, on this 20th day of February, 2024.



A handwritten signature in blue ink, reading "Michael L. Parson".

MICHAEL L. PARSON
GOVERNOR

ATTEST:

A handwritten signature in blue ink, reading "John R. Ashcroft".

JOHN R. ASHCROFT
SECRETARY OF STATE

EXECUTIVE ORDER
24-04

WHEREAS, Section 105.454(5), RSMo, requires the Governor to designate those members of his staff who have supervisory authority over each department, division, or agency of state government for purposes of the application of such subdivision.

NOW THEREFORE, I, MICHAEL L. PARSON, GOVERNOR OF THE STATE OF MISSOURI, by virtue of the authority vested in me by the Constitution and laws of the State of Missouri, do hereby designate the following members of my staff as having supervisory authority over the following departments, divisions, or agencies of state government for the purposes of Section 105.454(5), RSMo:

Office of Administration	Evan Rodriguez
Department of Agriculture	Tyler Hobbs
Department of Conservation	Jamie Birch
Department of Corrections	Evan Rodriguez
Department of Economic Development	Aaron Willard
Department of Elementary and Secondary Education	Jamie Birch
Department of Health and Senior Services	Tyler Hobbs
Department of Higher Education	Aaron Willard
and Workforce Development	
Department of Commerce and Insurance	Jamie Birch
Department of Labor and Industrial Relations	Jamie Birch
Department of Mental Health	Tyler Hobbs
Department of National Guard	Evan Rodriguez
Department of Natural Resources	Evan Rodriguez
Department of Public Safety	Tyler Hobbs
Department of Revenue	Tyler Hobbs
Department of Social Services	Evan Rodriguez
Department of Transportation	Aaron Willard
Missouri Housing Development Commission	Jamie Birch
Boards Assigned to the Governor	Kelli Jones
Unassigned Boards and Commissions	Kelli Jones

IN WITNESS WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Missouri, in the City of Jefferson, on this 29th day of February, 2024.



A handwritten signature in blue ink, reading "Michael L. Parson", written over a horizontal line.

MICHAEL L. PARSON
GOVERNOR

ATTEST:

A handwritten signature in black ink, reading "John R. Ashcroft", written over a horizontal line.

JOHN R. ASHCROFT
SECRETARY OF STATE

The text of proposed rules and changes will appear under this heading. A notice of proposed rulemaking is required to contain an explanation of any new rule or any change in an existing rule and the reasons therefor. This explanation is set out in the PURPOSE section of each rule. A citation of the legal authority to make rules is also required, and appears following the text of the rule, after the word "Authority."

Entirely new rules are printed without any special symbology under the heading of proposed rule. If an existing rule is to be amended or rescinded, it will have a heading of proposed amendment or proposed rescission. Rules that are proposed to be amended will have new matter printed in boldface type and matter to be deleted placed in brackets.

An important function of the *Missouri Register* is to solicit and encourage public participation in the rulemaking process. The law provides that for every proposed rule, amendment, or rescission there must be a notice that anyone may comment on the proposed action. This comment may take different forms.

If an agency is required by statute to hold a public hearing before making any new rules, then a Notice of Public Hearing will appear following the text of the rule. Hearing dates must be at least thirty (30) days after publication of the notice in the *Missouri Register*. If no hearing is planned or required, the agency must give a Notice to Submit Comments. This allows anyone to file statements in support of or in opposition to the proposed action with the agency within a specified time, no less than thirty (30) days after publication of the notice in the *Missouri Register*.

An agency may hold a public hearing on a rule even though not required by law to hold one. If an agency allows comments to be received following the hearing date, the close-of-comments date will be used as the beginning day in the ninety- (90-) day count necessary for the filing of the order of rulemaking.

If an agency decides to hold a public hearing after planning not to, it must withdraw the earlier notice, file a new notice of proposed rulemaking, and schedule a hearing for a date not less than thirty (30) days from the date of publication of the new notice.

Proposed Amendment Text Reminder:

Boldface text indicates new matter.

[Bracketed text indicates matter being deleted.]

TITLE 3 – DEPARTMENT OF CONSERVATION Division 10 – Conservation Commission Chapter 4 – Wildlife Code: General Provisions

PROPOSED AMENDMENT

3 CSR 10-4.113 Ginseng. The commission proposes to add a new section (1), delete section (3), renumber subsequent sections, amend new sections (2) and (3), amend section (4), and add new sections (5) and (6) to this rule.

PURPOSE: *This proposed amendment modifies the requirements for the harvest, transportation, possession, buying, selling, importation, and exportation of ginseng, including establishing permit requirements and permit exemptions for specified activities. This amendment also removes ginseng dealer registration and recordkeeping requirements from this rule.*

(1) Any person harvesting, transporting, possessing, buying, selling, importing, or exporting ginseng (*Panax quinquefolium*) in any manner, or attempting any of these acts, must obtain and have on his/her person the prescribed permit, temporary permit authorization number(s), or evidence of exemption as specified in this rule, 3 CSR 10-10.800, or 3 CSR 10-10.810. The temporary permit authorization number(s) and picture identification must be carried at all times while exercising privileges related to ginseng until the actual permit(s) is received. Harvesting means the collecting, picking, or digging of any part (including seeds and roots) of a ginseng plant. Harvested ginseng roots in wet or dry form shall be classified as a product made from an endangered species of plant as defined in section 252.240, RSMo, and is listed in the "Appendices on the Convention on International Trade in Endangered Species of Wild Fauna and Flora." The possession of harvested uncertified ginseng roots shall constitute an acknowledgment that possession is with the intent to sell a product made from an endangered species of plant.

[(1)](2) *[Wild g]Ginseng [(Panax quinquefolium)]* may be harvested **and transported by the holder of the prescribed ginseng harvester permit or by landowners as prescribed in section (5) of this rule** from September 1 through December 31. *[Wild]* All ginseng plants or roots harvested must possess three (3) or more true leaves (prongs). The entire stalk, minus the mature fruits, shall be kept with the plants until they are taken to the harvester's home or place of business. When harvesting *[wild]* ginseng, *[harvesters]* **the harvester** shall plant all seeds from harvested plants within one hundred feet (100') of the parent plants. *[Plants or roots of wild ginseng taken in Missouri, or acquired from outside the state, may be purchased, sold, transported, or exported]* **Uncertified ginseng plants or roots harvested by the permittee or by landowners as prescribed in section (5) of this rule may be possessed, transported, or sold in dried form only from September 15 through March 15[;], provided[,] wet or undried roots may be [purchased] possessed, sold, or transported[, or exported] only from September 1 through March 15 [and certified roots may be possessed, purchased, sold, transported, or exported throughout the year in accordance with this rule].** Uncertified ginseng plants or roots may be possessed, transported, or sold only by the harvester of the plants or roots and may not be exported from the state. Uncertified ginseng plants or roots may be sold or given away only to the holder of a Missouri ginseng dealer permit. Except as specifically provided in 3 CSR 10-10.800, 3 CSR 10-10.805, and 3 CSR 10-10.810, no person may possess or transport uncertified ginseng plants harvested by another person. The holder of a valid ginseng harvester permit or landowner as prescribed in section (5) of this rule may sell or give away certified ginseng plants or roots to any person throughout the year, but only the plants or roots personally harvested by him/her during the prescribed ginseng harvest season.

[(2)](3) *[Wild and cultivated Missouri ginseng]* Ginseng plants or roots exported from the state must be accompanied by a numbered certificate of origin on forms provided by the department. Roots may be imported from other states, territories, or countries **and transported within Missouri, but only [with] when possession is accompanied by the appropriate certification of origin issued by the state, territory, or country the ginseng originated from.** Uncertified roots that have been received from outside the state must be

[returned to that state for certification within thirty (30) days of receipt. Uncertified Missouri wild roots may be possessed only from September 1 through March 15] reported to a conservation agent immediately upon receipt and disposed of only in accordance with their instructions. Except for uncertified ginseng plants or roots possessed, bought, sold, or obtained in accordance with section (2) of this rule or 3 CSR 10-10.810(2), all ginseng plants or roots possessed, bought, sold, or obtained in Missouri must be accompanied by a numbered certificate of origin on forms provided by the department or the appropriate certification of origin issued by the state, territory, or country the ginseng originated from. Certificate of origin forms are issued for specific and indivisible weights of ginseng and may be obtained from a conservation agent for a fee of twenty-five dollars (\$25) for each certificate issued. Certification fees must be paid prior to the issuance of a certification of origin form. Certified ginseng plants or roots may be bought, obtained, or possessed without permit by any person throughout the year, except certified ginseng plants and roots may be bought, obtained, or possessed for resale only as specifically authorized by 3 CSR 10-10.800, 3 CSR 10-10.805, and 3 CSR 10-10.810.

[(3) Any person, group, or business that purchases ginseng roots in Missouri for resale must register annually with the department as a ginseng dealer, and submit quarterly reports of all transactions within fifteen (15) days of the preceding buying period and an annual report of inventory, on forms provided by the department. Printed copies of these forms can be obtained from the Missouri Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180 and online at www.missouriconservation.org. Annual registration shall be contingent upon compliance with this rule and receipt of the required reports. All records required by this rule shall be retained for three (3) years.]

(4) [Any person, group or business that purchases ginseng roots in Missouri for resale, but is registered as a ginseng dealer in another state and does not purchase or sell ginseng roots from an address in the state, is not required to register with the department as a ginseng dealer] Ginseng is designated an endangered species of plant as defined in section 252.240, RSMo, and is listed in the "Appendices on the Convention on International Trade in Endangered Species of Wild Fauna and Flora." Ginseng may not be harvested from lands owned or leased by the commission, except by the holder of a Letter of Authorization for Plant Collecting as authorized by 3 CSR 10-11.110, and may not be harvested without the permission of the property owner on all other lands located within Missouri, including those lands owned or controlled by other government entities. Ginseng seeds may be collected without permit from lands other than those owned or leased by the commission when the remainder of the plant or root is not harvested, but only with the permission of the property owner. Legally obtained ginseng seeds may be possessed, transported, bought, sold, imported, or exported without permit by any person throughout the year.

(5) Resident and nonresident landowners as defined in 3 CSR 10-20.805 may harvest, possess, transport, sell, or export ginseng harvested from the landowner's qualifying property without a ginseng harvester permit, but only in accordance with sections (1) through (3) of this rule. Landowners selling or giving away uncertified ginseng

harvested or possessed in accordance with this section shall first obtain a landowner harvest authorization number from the department and shall provide their landowner harvest authorization number to the Missouri ginseng dealer obtaining the ginseng at the time of transfer or sale.

(6) This rule shall not apply to commercially manufactured food products or dietary supplements containing ginseng as an ingredient, and such items may be possessed, transported, bought, sold, imported, or exported without permit by any person throughout the year.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Aug. 29, 1983, effective Jan. 1, 1984. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will cost public entities a one-time expense of one thousand four hundred ninety-three dollars and seventy-five cents (\$1,493.75).

PRIVATE COST: This proposed amendment will cost private entities two hundred seventy-five dollars (\$275) annually.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PUBLIC COST**

- I. **Department Title: Department of Conservation**
Division Title: Title 10 – Conservation Commission
Chapter Title: Chapter 4 – Wildlife Code: General Provisions

Rule Number and Name:	3 CSR 10-4.113 Ginseng
Type of Rulemaking:	Proposed Amendment

II. **SUMMARY OF FISCAL IMPACT**

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Missouri Department of Conservation	\$1,493.75 (one-time cost)

III. **WORKSHEET**

The department's permit system vendor estimates it will be a one-time cost of \$5,975 for the development of a new template, or changes to the ginseng certification product to allow it to issue a unique permit number for each certification issued. This estimated cost is required for the ginseng certifications required by this rule and the proposed rule 3 CSR 10-10.810. It is estimated that 25% of the certifications completed by conservation agents will be requested by ginseng harvesters to comply with this rule.

\$5,975 (total cost to develop a new template in the department's permit system to complete ginseng certifications) X 25% (number of certifications requested by ginseng harvesters to comply with this rule) = \$1,493.75 (one-time cost to comply with this rule)

IV. **ASSUMPTIONS**

This estimate assumes that 25% of the ginseng certifications will be requested by ginseng harvesters to comply with this rule. Fiscal impact to certification requirements for Ginseng Dealers are quantified in the fiscal note for the Proposed Rule to 3 CSR 10-10.810.

**FISCAL NOTE
PRIVATE COST**

I. Department Title: Department of Conservation

Division Title: Division 10 - Conservation Commission
Chapter Title: Chapter 4 - Wildlife Code: General Provisions

Rule Number and Title:	3 CSR 10-4.113 Ginseng
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
Estimated 11 certifications issued for ginseng to Ginseng Harvesters each year	Botanical trade	\$275 annual aggregate

III. WORKSHEET

43 (five-year annual average ginseng certification) x 25% (estimated % of certifications issued to Ginseng Harvesters) = 10.75 rounded to nearest whole number = 11 (certifications issued to Ginseng Harvesters)

11 (certifications issued to Ginseng Harvesters) x \$25 (cost of certification) = \$275 annual aggregate.

IV. ASSUMPTIONS

The previous five-year annual average number of ginseng certifications issued is 43. It is estimated that 75% of these certifications will be requested by Ginseng Dealers and 25% will be requested by Ginseng Harvesters. Fiscal impact to certification requirements for Ginseng Dealers are quantified in the fiscal note for the Proposed Rule to 3 CSR 10-10.810. Because ginseng certifications are indivisible, the quantity of certifications issued to Ginseng Harvesters has been rounded to the nearest whole number.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 4 – Wildlife Code: General Provisions

PROPOSED AMENDMENT

3 CSR 10-4.117 Prohibited Species. The commission proposes to amend subsections (2)(C) and (2)(D) and add a new subsection (2)(E) of this rule.

PURPOSE: This proposed amendment adds the Italian wall lizard and common wall lizard to the Prohibited Species List so these species cannot be imported, exported, transported, sold, purchased, or possessed alive in Missouri.

(2) For the purpose of this rule, prohibited species of wildlife shall include the following:

(C) Fishes: Live fish or viable eggs of black carp (*Mylopharyngodon piceus*); round goby (*Neogobius melanostomus*); tubenose goby (*Proterorhinus semilunaris*); snakehead fish of the genera *Channa* or *Parachanna* (or the generic synonyms of *Bostrychoides*, *Ophicephalus*, *Ophiocephalus*, and *Parophiocephalus*); walking catfish of the family *Clariidae*; *[and]*

(D) Invertebrates: New Zealand mudsnail, *Potamopyrgus antipodarum*; rusty crayfish, *Faxonius rusticus*; marbled crayfish, *Procambarus virginalis*; crayfish of the genus *Cherax*; electric blue crayfish, *Procambarus allenii*; mitten crabs of the genus *Eriocheir*; zebra mussels, *Dreissena polymorpha*; quagga mussels, *Dreissena rostriformis*; mystery snails of the genus *Cipangopaludina*.; *and*

(E) Reptiles: Italian wall lizard, *Podarcis siculus*; common wall lizard, *Podarcis muralis*.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed April 20, 2005, effective Sept. 30, 2005. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 5 – Wildlife Code: Permits

PROPOSED AMENDMENT

3 CSR 10-5.205 Permits Required; Exceptions. The commission proposes to add section (2) to this rule.

PURPOSE: This proposed amendment establishes a permit requirement for persons who harvest, transport, ship, export, buy, sell, or possess ginseng.

(2) Any person who harvests, transports, ships, exports, buys, sells, obtains, possesses, or uses ginseng in any manner, or attempts any of these acts, must first obtain the prescribed ginseng harvester or dealer permit, or be exempted under 3 CSR 10-4.113, 3 CSR 10-10.800, or 3 CSR 10-10.810.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the *Code of State Regulations*. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 5 – Wildlife Code: Permits

PROPOSED AMENDMENT

3 CSR 10-5.215 Permits and Privileges: How Obtained; Not Transferable. The commission proposes to amend sections (2), (3), and (5) of this rule.

PURPOSE: This proposed amendment specifies that permits for the harvest of ginseng may only be issued to an individual and that Resident and Nonresident Ginseng Harvester Permits will be valid from the date of purchase through June 30. This amendment also makes grammatical edits to sections (3) and (5) of this rule.

(2) A permit for the taking of wildlife **or the harvesting of ginseng** may be issued only to an individual and may be used only by the individual to whom it is issued. No permit, application for permit, method exemption, Missouri Conservation Heritage Card, or special hunting or fishing tag may be loaned, predated, falsified, altered, or misrepresented in any manner, except that a Missouri Conservation Heritage Card may be presented by another to purchase permits on behalf of the person named thereon. No firearms hunting permit shall be issued without containing the hunter education certificate card number where applicable.

(3) The acceptance of a permit, *[or]* privilege, or method exemption shall constitute an acknowledgement of the duty to comply with the provisions of this Code and to pursue wildlife in a safe manner.*[, and a]*All permits and privileges

are conditioned upon such compliance.

(5) Permits are nontransferable and are valid from the date of purchase through the last day of February of the prescribed permit year[,], except the Migratory Bird Hunting Permit, **the Resident Ginseng Harvester Permit, the Nonresident Ginseng Harvester Permit**, the Resident Trapping Permit, and the Nonresident Furbearer Hunting and Trapping Permit shall be valid through June 30. Except as provided for permits purchased by telephone, no affidavit, receipt, or other document may be issued or used in lieu of the required permit. Temporary permit authorization number(s) allowing immediate use of permit privileges may be provided for permits (except black bear, deer, elk, and turkey permits) purchased through the department's authorized telephone sales service provider. The temporary permit authorization number(s) and picture identification must be carried at all times while hunting, fishing, or trapping until the actual permit(s) is received. Any permit issued or obtained by false statement or through fraud, or while privileges are revoked or denied by the commission, shall be invalid.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 23, 2024.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rule will cost private entities approximately thirty thousand dollars (\$30,000) annually.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 5 – Wildlife Code: Permits

PROPOSED RULE

3 CSR 10-5.800 Resident Ginseng Harvester Permit

PURPOSE: This rule establishes a permit for residents to harvest and transport, possess, export, and sell ginseng harvested by the permittee.

To harvest, possess, transport, or sell uncertified ginseng plants or roots personally harvested by the permittee in accordance with 3 CSR 10-4.113, or attempt any of these acts, and to sell or export certified ginseng plants or roots personally harvested by the permittee throughout the year. Fee: twenty dollars (\$20).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Feb. 23, 2024.

**FISCAL NOTE
PRIVATE COST****I. Department Title: Department of Conservation****Division Title: Conservation Commission****Chapter Title: Chapter 5 – Wildlife Code: Permits**

Rule Number and Title:	3 CSR 10-5.800 Resident Ginseng Harvester Permit.
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
Estimated 1500 individuals that harvest ginseng	Botanical trade	\$30,000 annual

III. WORKSHEET

1,500 (estimated number of residents acquiring a permit) x \$20 (cost of the permit) = \$30,000 annual aggregate.

IV. ASSUMPTIONS

The assumption that approximately 1,500 residents harvest ginseng was determined by reviewing transaction reports from registered dealers.

**TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 5 – Wildlife Code: Permits**

PROPOSED RULE

3 CSR 10-5.805 Nonresident Ginseng Harvester Permit

PURPOSE: This rule establishes a permit for nonresidents to harvest and transport, possess, export, and sell ginseng harvested by the permittee.

To harvest, possess, transport, or sell uncertified ginseng plants or roots personally harvested by the permittee in accordance with 3 CSR 10-4.113, or attempt any of these acts, and to sell or export certified ginseng plants or roots personally harvested by the permittee throughout the year. Fee: one hundred fifty dollars (\$150).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Feb. 23, 2024.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rule will cost private entities an annual aggregate estimate of seven thousand five hundred dollars (\$7,500).

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PRIVATE COST****I. Department Title: Department of Conservation****Division Title: Conservation Commission****Chapter Title: Chapter 5 – Wildlife Code: Permits**

Rule Number and Title:	3 CSR 10-5.805 Non-resident Ginseng Harvester Permit.
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
Estimated 50 individual non-residents that harvest ginseng	Botanical trade	\$7,500 annual aggregate

III. WORKSHEET

50 (estimate of nonresident permits) x \$150 (cost of permit) = \$7,500 annual aggregate

4. ASSUMPTIONS

We have no data to estimate how many non-resident individuals would purchase a permit. No more than 50 individuals is an estimate provided by field staff that are familiar with non-resident ginseng harvesting.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 6 – Wildlife Code: Sport Fishing: Seasons,
Methods, Limits

PROPOSED AMENDMENT

3 CSR 10-6.415 Restricted Zones. The commission proposes to amend subsection (1)(F).

PURPOSE: This proposed amendment modifies the description of the current no-fishing zone in the tailwater immediately below the Truman Dam to make it consistent with posted signs and landmarks.

(1) The following zones are closed to all fishing:

(F) Osage River/Lake of the Ozarks [within five hundred twenty-five feet (525') on the left descending bank and nine hundred seventy-seven feet (977') on the right descending bank below Truman Dam in the U.S. Army Corps of Engineers' restricted zone] within a boundary beginning from the face of Truman Dam downstream along the left descending bank to the no-fishing zone sign at East Bledsoe Ferry Park (U.S. Army Corps of Engineers), across the water in a straight line to the no-fishing zone sign at West Bledsoe Ferry Park (U.S. Army Corps of Engineers), upstream along the right descending bank to the face of the Truman Dam, and returning to the point of origin along the face of the Truman Dam in the U.S Army Corps of Engineers' restricted zone; and

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. This rule previously filed as 3 CSR 10-4.115. Original rule filed June 13, 1994, effective Jan. 1, 1995. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 7 – Wildlife Code: Hunting: Seasons,
Methods, Limits

PROPOSED AMENDMENT

3 CSR 10-7.410 Hunting Methods. The commission proposes to amend subsections (1)(A) and (1)(C) of this rule.

PURPOSE: This proposed amendment allows the use of unmanned motor-driven air conveyances, commonly referred to as Unmanned Aerial Systems (UAS), Unmanned Aerial Vehicles (UAV), Remotely Piloted Aircraft Systems (RPAS), and drones, for the purpose of locating and recovering wounded black bear, deer, elk, and turkey during the open hunting seasons.

(1) Wildlife may be hunted and taken only in accordance with the following:

(A) Motor-Driven Air, Land, or Water Conveyances. No person shall pursue, take, attempt to take, drive, or molest wildlife from or with a motor-driven air, land, or water conveyance at any time[. Except as provided in 3 CSR 10-7.431, motor boats may be used if the motor has been completely shut off and its progress therefrom has ceased:], except as follows:

1. Motorboats may be used if the motor has been completely shut off and its progress therefrom has ceased, except as provided in 3 CSR 10-7.431;

2. Unmanned motor-driven air conveyances, commonly referred to as Unmanned Aerial Systems (UAS), Unmanned Aerial Vehicles (UAV), Remotely Piloted Aircraft Systems (RPAS), and drones, may be used to locate and recover wounded black bear, deer, elk, and turkey only in accordance with the following:

A. A black bear, deer, elk, or turkey is wounded when a properly licensed hunter has struck an animal with a projectile fired from a legal hunting method during the open season;

B. Any person operating an unmanned motor-driven air conveyance for the purposes of this paragraph must first obtain permission from the public or private landowner, or their authorized representative, prior to launching or landing a motor-driven air conveyance from or on such landowner's property. Nothing in this paragraph shall be construed to authorize trespass to locate and recover a wounded animal;

C. No person may possess or control a firearm, bow, or other implement whereby wildlife could be killed or taken while afield, whether acting singly or as one (1) of a group of persons, during times when an unmanned motor-driven air conveyance is in flight. This restriction shall not apply to the possession of concealable firearms, as defined in Chapter 571, RSMo, provided such firearms are not used to take wildlife;

D. Unmanned motor-driven air conveyances shall be operated in a manner that does not harass any wildlife. For the purposes of this paragraph, harass means to disturb, worry, molest, rally, concentrate, harry, chase, drive, herd, or torment. No person, whether acting singly or as one (1) of a group of persons, may pursue or take any wildlife that has been harassed by or with the aid of an unmanned motor-driven air conveyance; and

E. The use of an unmanned motor-driven air conveyance in accordance with this paragraph is specifically excluded from the definitions of pursue and take as defined in this Code. Operators of unmanned motor-driven air conveyances used in the recovery of a wounded animal as prescribed in this paragraph are exempt from hunting permit requirements, provided they are not the taker of the wounded animal;

(C) Night Vision, Infrared, and Thermal Imagery Equipment. Wildlife may not be pursued or taken with the aid of night vision, infrared, or thermal imagery equipment and no person may possess or control night vision, infrared, or thermal imagery equipment while acting singly or as one (1) of a group of persons while in possession of any firearm, bow, or other

implement whereby wildlife could be killed or taken, except as follows:

1. Landowners and their authorized representatives may possess or control and use night vision, infrared, or thermal imagery equipment while in possession of a firearm, bow, or other implement whereby wildlife could be killed or taken on such landowner's property to kill feral swine. For the purposes of this paragraph, a "landowner" is any person (including residents and non-residents) owning real property of any size and an "authorized representative" is any person who has permission from a landowner to be present on the landowner's property;

2. Hunters properly licensed to take furbearers may possess or control and use night vision, infrared, and thermal imagery equipment to take coyotes from February 1 through March 31, but only in conjunction with other legal hunting methods. The use of night vision, infrared, or thermal imagery equipment to pursue or take coyotes from or with a motor-driven air, land, or water conveyance, or from or across a public roadway is specifically prohibited; *[and]*

3. Any person may possess or control and use night vision, infrared, or thermal imagery equipment while in possession of any firearm, bow, or other implement whereby wildlife could be killed or taken with written authorization of an agent of the department, but only as specifically authorized by him/her; **and**

4. **An unmanned motor-driven air conveyance equipped with night vision, infrared, or thermal imagery devices may be possessed or controlled while acting singly or as one (1) of a group of persons while in possession of any firearm, bow, or other implement whereby wildlife could be killed or taken, but only as specifically authorized by paragraph (1)(A)2. of this rule for the purpose of locating and recovering wounded black bear, deer, elk, and turkey;**

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 7 – Wildlife Code: Hunting: Seasons,
Methods, Limits**

PROPOSED AMENDMENT

3 CSR 10-7.431 Deer Hunting Seasons: General Provisions. The commission proposes to amend subsections (5)(B) and (7) (C) of this rule.

PURPOSE: This proposed amendment allows the use of unmanned motor-driven air conveyances to recover wounded deer as specifically authorized by 3 CSR 10-7.410 and fixes an inconsistency between the definition of muzzleloading firearm in 3 CSR 10-20.805 and the muzzleloading methods allowed for deer hunting by subsection (5)(B) of this rule.

(5) Deer Hunting Methods.

(B) Muzzleloader: muzzleloading *[or]* **firearms as defined in 3 CSR 10-20.805 (including cap-and-ball firearms)[.]** .40 caliber or larger*[, not capable of being loaded from the breech].*

(7) Deer may not be hunted, pursued, taken, or killed –

(C) With the aid of a motor-driven land conveyance or aircraft, **except unmanned motor-driven air conveyances may be used to recover wounded deer as specifically authorized by 3 CSR 10-7.410;**

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed April 29, 2004, effective May 15, 2004. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 7 – Wildlife Code: Hunting: Seasons,
Methods, Limits**

PROPOSED AMENDMENT

3 CSR 10-7.700 Elk Hunting Seasons: General Provisions. The commission proposes to amend subsection (5)(C) of this rule.

PURPOSE: This proposed amendment allows the use of unmanned motor-driven air conveyances to recover wounded elk as specifically authorized by 3 CSR 10-7.410.

(5) Elk may not be hunted, pursued, taken, or killed –

(C) With the aid of a motor-driven land conveyance or aircraft, **except unmanned motor-driven air conveyances may be used to recover wounded elk as specifically authorized by 3 CSR 10-7.410;**

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed June 28, 2019, effective Dec. 30, 2019. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 23, 2024.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 10 – Wildlife Code: Commercial Permits:
Seasons, Methods, Limits

PROPOSED AMENDMENT

3 CSR 10-10.705 Commercialization. The commission proposes to amend sections (1) through (5) of this rule.

PURPOSE: This proposed amendment requires persons commercializing in ginseng to possess the prescribed permit, prohibits the loaning, falsification, or misrepresentation of a commercial ginseng permit or application, and provides that commercial ginseng permits are valid from July 1 through June 30 of the prescribed permit year.

(1) Wildlife **or ginseng** may be bought, sold, offered for sale, exchanged, transported, or delivered only under the conditions of the prescribed permit, or as otherwise provided in this chapter. No affidavit, receipt, or other document may be issued or used in lieu of the required permit. Any permit issued or obtained by false statement or through fraud, or while permits are revoked or denied by the commission, shall be invalid. The commission may suspend, revoke, or deny a permit or privilege for cause, but not until an opportunity has been afforded for a hearing before the commission or its authorized representative. Hearings under this section shall be contested cases pursuant to Chapter 536, RSMo, and any person aggrieved by a final decision shall be entitled to judicial review as provided in Chapter 536, RSMo.

(2) Permits for commercial wildlife **or ginseng** may be obtained only upon satisfaction of all requirements imposed by this code, including payment of fees at the time of application.

(3) No commercial wildlife **or ginseng** permit, or commercial wildlife **or ginseng** permit application, may be loaned, falsified, altered, or misrepresented in any manner.

(4) The acceptance of a permit for commercial wildlife **or ginseng** shall constitute an acknowledgment of the duty to

comply with the provisions of this code.

(5) Permits for commercial wildlife **or ginseng** are nontransferable and are valid from July 1 through June 30 of the prescribed permit year.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Aug. 18, 1970, effective Dec. 31, 1970. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 23, 2024.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 10 – Wildlife Code: Commercial Permits:
Seasons, Methods, Limits

PROPOSED AMENDMENT

3 CSR 10-10.707 Resident Fur Dealer's Permit. The commission proposes to amend the text of this rule and restructure it into section and subsections.

PURPOSE: This proposed amendment establishes a new three-(3-) day permit for buying and selling furs for residents.

(1) To buy, sell, possess, process, transport, and ship the pelts and carcasses of furbearers and the pelts of bears legally harvested outside of Missouri from July 1 through June 30, **except as provided in subsection (1)(B) of this rule**. Permits issued to a firm, organization, or partnership for individual or itinerant use shall include the names of no more than four (4) resident users [*Fee: one hundred dollars (\$100)*].

(A) Annual Permit. **Fee: one hundred dollars (\$100).**

(B) Three- (3-) Day Permit. To buy the pelts and carcasses of furbearers and the pelts of bears legally harvested outside of Missouri for three (3) consecutive days, and to sell, possess, process, transport, and ship the pelts and carcasses acquired during the three (3) days indicated on the permit from July 1 through June 30. **Fee: fifty dollars (\$50).**

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Aug. 16, 1973, effective Dec. 31, 1973. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 23, 2024.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities between five hundred dollars (\$500) and two thousand dollars (\$2,000) annually.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

FISCAL NOTE

PRIVATE COST

- I. **Department Title: Department of Conservation**
Division Title: Division 10 – Conservation Commission
Chapter Title: Chapter 10—Wildlife Code: Commercial Permits: Seasons, Methods, Limits

Rule Number and Name:	3 CSR 10-10.707 Resident Fur Dealer's Permit
Type of Rulemaking:	Proposed Amendment

II. **SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
Range of 10 to 40	Individuals that may be interested in purchasing a 3-day permit that previously did not purchase an annual permit	Range of \$500 to \$2,000 annually

III. **WORKSHEET**

Range Maximum (40)

[40 (number of individuals that previously did not purchase an annual Resident Fur Dealer Permit) X \$50 (cost of Resident 3-day Fur Dealer Permit)] = \$2,000

Range Minimum (10):

[10 (number of individuals that previously did not purchase an annual Resident Fur Dealer Permit) X \$50 (cost of Resident 3-day Fur Dealer Permit)] = \$500

IV. **ASSUMPTIONS**

In consultation with stakeholders, we estimate that potentially 10-40 residents will annually purchase the new permit that previously did not purchase an annual Fur Dealer Permit.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 10 – Wildlife Code: Commercial Permits:
Seasons, Methods, Limits

PROPOSED AMENDMENT

3 CSR 10-10.708 Nonresident Fur Dealer's Permit. The commission proposes to amend the text of this rule and restructure it into sections and subsections.

PURPOSE: This proposed amendment establishes a new three-(3-) day permit for buying and selling furs for nonresidents.

(1) To buy, sell, possess, process, transport, and ship the pelts and carcasses of furbearers and the pelts of bears legally harvested outside of Missouri from July 1 through June 30, **except as provided in subsection (1)(B) of this rule.** Nonresident fur dealers shall conduct business only at the locations in Missouri specified on the permit, with resident fur dealers at their business location and at established fur auction sites [*Fee: three hundred dollars (\$300)*].

(A) Annual Permit. Fee: three hundred dollars (\$300).

(B) Three- (3-) Day Permit. To buy the pelts and carcasses of furbearers and the pelts of bears legally harvested outside of Missouri for three (3) consecutive days, and to sell, possess, process, transport, and ship the pelts and carcasses acquired during the three (3) days indicated on the permit from July 1 through June 30. **Fee: one hundred fifty dollars (\$150).**

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed March 6, 2006, effective Aug. 30, 2006. Amended: Filed Sept. 4, 2020, effective Feb. 28, 2021. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities between five hundred dollars (\$500) and two thousand dollars (\$2,000) annually.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

FISCAL NOTE

PRIVATE COST

- I. **Department Title: Department of Conservation**
Division Title: Division 10 – Conservation Commission
Chapter Title: Chapter 10—Wildlife Code: Commercial Permits: Seasons, Methods, Limits

Rule Number and Name:	3 CSR 10-10.708 Nonresident Fur Dealer's Permit
Type of Rulemaking:	Proposed Amendment

II. **SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
Range of 5 to 10	Individuals that may be interested in purchasing a 3-day permit that previously did not purchase an annual permit	Range of \$500 to \$1,000 annually

III. **WORKSHEET**

Range Maximum (10)

[10 (number of individuals that previously did not purchase an annual Nonresident Fur Dealer Permit) X \$100 (cost of Nonresident 3-day Fur Dealer Permit)] = \$1,000

Range Minimum (5):

[5 (number of individuals that previously did not purchase an annual Nonresident Fur Dealer Permit) X \$100 (cost of Nonresident 3-day Fur Dealer Permit)] = \$500

IV. **ASSUMPTIONS**

In consultation with stakeholders, we estimate that potentially 5-10 nonresidents will annually purchase the new permit that previously did not purchase an annual Fur Dealer Permit.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 10 – Wildlife Code: Commercial Permits:
Seasons, Methods, Limits

PROPOSED RULE

3 CSR 10-10.800 Resident Ginseng Dealer Permit

PURPOSE: This rule establishes a resident ginseng dealer permit to buy, obtain, possess, and transport uncertified ginseng roots from the holder of a Missouri resident or nonresident ginseng harvester permit and to buy, obtain, possess, or transport certified ginseng plants or roots for the purpose of resale. This rule also identifies persons who are exempt from ginseng permit dealer requirements.

To buy, obtain, possess, or transport uncertified ginseng plants or roots harvested by the holder of a Missouri ginseng harvester permit or landowner harvest authorization number in accordance with 3 CSR 10-10.810, and to buy, obtain, possess, or transport certified ginseng plants or roots for the purpose of resale, or attempt any of these acts, and to export certified ginseng plants or roots. Permits issued to a firm, organization, or partnership for individual or itinerate use shall include the names of no more than four (4) resident users. Commercial establishments buying or obtaining certified ginseng for use as an ingredient in manufactured food products or dietary supplements that will be sold to the general public are excluded from the permit requirement of this rule and 3 CSR 10-10.805. Fee: one hundred dollars (\$100).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Feb. 23, 2024.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rule will cost private entities one thousand five hundred dollars (\$1,500) annually.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PRIVATE COST**

I. Department Title: Department of Conservation

Division Title: Conservation Commission

Chapter Title: Chapter 10-Wildlife Code: Commercial Permits: Seasons, Methods, Limits

Rule Number and Title:	3 CSR 10-10.800 Resident Ginseng Dealer Permit
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
15 Registered ginseng dealers	Botanical trade	\$1,500 annual aggregate

III. WORKSHEET

15 (estimated number of registered dealers) x \$100 (cost of permit) = \$1,500 annual aggregate.

4. ASSUMPTIONS

There were 15 registered dealers in Missouri as of May 2020.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 10 – Wildlife Code: Commercial Permits:
Seasons, Methods, Limits

PROPOSED RULE

3 CSR 10-10.805 Nonresident Ginseng Dealer Permit

PURPOSE: This rule establishes a nonresident ginseng dealer permit to buy, obtain, possess, and transport uncertified ginseng roots from the holder of a Missouri resident or nonresident ginseng harvester permit and to buy, obtain, possess, or transport certified ginseng plants or roots for the purpose of resale.

To buy, obtain, possess, or transport uncertified ginseng plants or roots harvested by the holder of a Missouri ginseng harvester permit or landowner harvest authorization number in accordance with 3 CSR 10-10.810, and to buy, obtain, possess, or transport certified ginseng plants or roots for the purpose of resale, or attempt any of these acts, and to export certified ginseng plants or roots. Fee: three hundred dollars (\$300).

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Feb. 23, 2024.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rule will cost private entities one thousand five hundred dollars (\$1,500) annually.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PRIVATE COST**

I. Department Title: Department of Conservation

Division Title: Conservation Commission

Chapter Title: Chapter 10-Wildlife Code: Commercial Permits: Seasons, Methods, Limits

Rule Number and Title:	3 CSR 10-10.805 Nonresident Ginseng Dealer Permit
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
5 Registered ginseng dealers	Botanical trade	\$1,500 annual aggregate

III. WORKSHEET

5 (estimated number of nonresident ginseng dealers) x \$300 (cost of ginseng dealer permit) = \$1,500 annual aggregate

4. ASSUMPTIONS

Currently, there is only one nonresident Missouri dealer that is registered with MDC. However, current regulations require that nonresident dealers must only be registered in their home state. The likely number of nonresident dealers interested in obtaining a Missouri Nonresident Dealer Permit is low due to certification requirements before leaving the state with ginseng. We estimate there will be 5 nonresident dealers.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 10 – Wildlife Code: Commercial Permits:
Seasons, Methods, Limits

PROPOSED RULE

3 CSR 10-10.810 Ginseng Dealers: Privileges, Recordkeeping, Reporting Requirements

PURPOSE: This rule specifies the privileges that may be exercised by Missouri ginseng dealers and the recordkeeping and reporting requirements they must follow for all ginseng transactions.

(1) For the purposes of this Code, the term ginseng dealer(s) shall mean ginseng dealers permitted in Missouri. Ginseng dealers may buy, sell, obtain, possess, transport, import, and export ginseng plants or roots and possess such plants and roots for resale, but only in accordance with this rule, 3 CSR 10-4.113, 3 CSR 10-10.800, and 3 CSR 10-10.805. Harvested ginseng roots in wet or dry form shall be classified as a product made from an endangered species of plant as defined in 252.240, RSMo, and is listed in the "Appendices on the Convention on International Trade in Endangered Species of Wild Fauna and Flora." The acceptance of a ginseng dealer permit shall constitute an acknowledgment that the possession of ginseng roots in any quantity is with the intent to sell a product made from an endangered species of plant.

(2) Ginseng dealers may buy, obtain, possess, and transport uncertified ginseng roots from the holder of a valid Missouri ginseng harvester permit or from a landowner with a landowner harvest authorization number in dried form only from September 15 through March 15, provided wet or undried roots may be bought, obtained, possessed, and transported only from September 1 through March 15. Uncertified harvested ginseng plants or roots may be possessed only from September 1 through March 15.

(3) Certified ginseng plants or roots may be bought, obtained, transported, possessed for sale, exported, or sold by a ginseng dealer throughout the year. Ginseng plants or roots exported from the state by a ginseng dealer must be accompanied by a numbered certificate of origin on forms provided by the department. Roots may be imported from other states, territories, or countries and possessed and transported within Missouri for resale by a ginseng dealer, but only when possession is accompanied by the appropriate certification of origin issued by the state, territory, or country the ginseng originated from. Uncertified roots that have been received by a ginseng dealer from outside the state must be reported to a conservation agent immediately upon receipt and disposed of only in accordance with the agent's instructions. Except for uncertified ginseng plants or roots possessed, bought, sold, or obtained in accordance with section (2) of this rule, all ginseng plants or roots possessed, bought, sold, or obtained by a ginseng dealer must be accompanied by a numbered certificate of origin on forms provided by the department or the appropriate certification of origin issued by the state, territory, or country the ginseng originated from. Certificate of origin forms are issued for specific and indivisible weights of ginseng and may be obtained from a conservation agent for a fee of twenty-five dollars (\$25) for each certificate issued. Certification fees must be paid prior to the issuance of a certification of origin form.

(4) Each ginseng dealer shall keep an up-to-date, accurate record of all transactions made concerning ginseng plants or roots. For each transaction, the name, address, and permit number and type (if applicable) of the other party to the transaction, landowner harvest authorization number (if applicable), transaction type, weight, and certificate of origin number (if applicable) shall be recorded immediately on a form provided by the department. All such records and ginseng plants or roots shall be made available for inspection by an authorized agent of the department at any reasonable time. All records required by this rule shall be retained for three (3) years.

(5) Each ginseng dealer shall submit quarterly transaction reports and annual inventory reports on forms provided by the department. Printed copies of these forms can be obtained from the Missouri Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180 and online at www.missouriconservation.org. Quarterly reports shall include all transactions in ginseng roots for the three (3) months preceding January, April, July, and October of the current year and an inventory of all ginseng roots held in storage after March 15. Quarterly reports shall be submitted by the 15th day of January, April, July, and October of the current year, and annual inventory reports shall be submitted by April 1 of the current year.

(6) Permits shall be contingent upon compliance with this rule. Failure to comply with this rule, or to submit quarterly transaction reports or an annual inventory report, shall be sufficient cause for the department to revoke the current year's ginseng dealer permit and deny renewal of the permit for the following year.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. Original rule filed Feb. 23, 2024.

PUBLIC COST: This proposed rule will cost public entities a one-(1-) time expense of four thousand four hundred eighty-one dollars and twenty-five cents (\$4,481.25).

PRIVATE COST: This proposed rule will cost private entities eight hundred dollars (\$800) annually.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PUBLIC COST**

- I. **Title 3 - Department of Conservation
Title 10 – Conservation Commission
Chapter Title: Commercial Permits: Seasons, Methods, Limits**

Rule Number and Name:	3 CSR 10-10.810 Ginseng Dealers: Privileges, Record Keeping, Reporting Requirements
Type of Rulemaking:	Proposed Rule

- II. **SUMMARY OF FISCAL IMPACT**

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Missouri Department of Conservation Permit Services	\$ 4,481.25 (one-time cost)

- III. **WORKSHEET**

The department's permit system vendor estimates it will be a one-time cost of \$5,975 for the development of a new template, or changes to the ginseng certification product to allow it to issue a unique permit number for each certification issued. This estimated cost is required for the ginseng certifications required by this rule and 3 CSR 10-4.113. It is estimated that 75% of the certifications completed by conservation agents will be requested by ginseng dealers to comply with this rule.

\$5,975 (total cost to develop a new template in the department's permit system to complete ginseng certifications) X 75% (number of certifications requested by ginseng harvesters to comply with this rule) = \$4,481.25 (one-time cost to comply with this rule)

- IV. **ASSUMPTIONS**

This estimate assumes that 75% of the ginseng certifications will be requested by ginseng dealers to comply with this rule.

FISCAL NOTE
PRIVATE COST

I. Department Title: Department of Conservation

Division Title: Title 10 - Conservation Commission

Chapter Title: Chapter 10 - Wildlife Code: Commercial Permits: Seasons, Methods, Limits

Rule Number and Title:	3 CSR 10-10.810 Ginseng Dealers: Privileges, Record Keeping, Reporting Requirements
Type of Rulemaking:	Proposed Rule

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
Estimated 32 certifications issued for ginseng to Ginseng Dealers each year	Botanical trade	\$800 annual aggregate

III. WORKSHEET

43 (five-year annual average ginseng certification) x 75% (estimated % of certifications issued to Ginseng Dealers) = 32.25 rounded to nearest whole number = 32 (certifications issued to Ginseng Harvesters)

32 (certifications issued to Ginseng Harvesters) x \$25 (cost of certification) = \$800 annual aggregate.

II. ASSUMPTIONS

The previous five-year annual average number of ginseng certifications issued is 43. It is estimated that 75% of these certifications will be requested by Ginseng Dealers and 25% will be requested by Ginseng Harvesters. Fiscal impact to certification requirements for Ginseng Dealers are quantified in the fiscal note for the Proposed Amendment to 3 CSR 10-4.113. Because ginseng certifications are indivisible, the quantity of certifications issued to Ginseng Dealers has been rounded to the nearest whole number.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 11 – Wildlife Code: Special Regulations for
Department Areas

PROPOSED AMENDMENT

3 CSR 10-11.130 Vehicles, Bicycles, Horses, and Horseback Riding. The commission proposes to add a new section (8) to this rule.

PURPOSE: This proposed amendment allows the use of unmanned motor-driven air conveyances to recover wounded black bear, deer, elk, and turkey as specifically authorized by 3 CSR 10-7.410 on department areas with prior authorization from a conservation agent.

(8) Unmanned motor-driven air conveyances may be used for the recovery of wounded black bear, deer, elk, and turkey as specifically authorized by 3 CSR 10-7.410, but only with prior authorization from a conservation agent. Authorization to use unmanned motor-driven air conveyances on department areas for recovery of wounded animals is at the discretion of the conservation agent, and the locations and times where use is authorized may be restricted to minimize conflicts with resource management activities or public use. Any person using unmanned motor-driven air conveyances in accordance with this section for pay is exempt from the permit requirements of 3 CSR 10-11.111 for commercial use on department areas.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. This rule previously filed as 3 CSR 10-4.115. Original rule filed April 30, 2001, effective Sept. 30, 2001. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 11 – Wildlife Code: Special Regulations for
Department Areas

PROPOSED AMENDMENT

3 CSR 10-11.155 Decoys and Blinds. The commission proposes to amend subsection (1)(B) of this rule.

PURPOSE: The proposed amendment removes Upper Mississippi Conservation Area from having an annual drawing to allocate blind locations after the 2024 drawing. This will result in all sections of Upper Mississippi Conservation Area falling under the statewide regulations (section (1)) for decoys and blinds beginning in 2026.

(1) Decoys and blinds are permitted but must be removed from the area daily and may not be left unattended between the hours of 10:00 p.m. and 4:00 a.m., except as otherwise provided in this chapter. Blinds may not be constructed on-site from woody vegetation except for willows (*Salicaceae* spp.).

(B) On those portions of Upper Mississippi Conservation Area designated as restricted waterfowl hunting areas, blind sites shall be designated and allotted through a system of registration and drawing established by the department. **No blind drawings will take place after the 2024 drawing.** Blinds must be constructed in accordance with specifications, dates, and other requirements as described in the *Upper Mississippi Conservation Area Waterfowl Hunting Information* booklet. Waterfowl may be taken only from a designated blind except that hunters may retrieve dead birds and pursue and shoot downed cripples. This rule does not apply during the early teal season and the early Canada goose season. On portions of the area designated as open, blinds may be constructed without site restrictions. Blinds or blind sites on both restricted and open portions of the area may not be locked, transferred, rented, or sold. Boats shall not be left overnight at blind sites. Blinds unoccupied at one-half (1/2) hour before legal shooting time may be used by the first hunter to arrive.

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. This rule previously filed as 3 CSR 10-4.115. Original rule filed April 30, 2001, effective Sept. 30, 2001. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 20 – Wildlife Code: Definitions

PROPOSED AMENDMENT

3 CSR 10-20.805 Definitions. The commission proposes to amend sections (47) and (56).

PURPOSE: This proposed amendment standardizes the ownership qualifications for resident and non-resident landowners for lands owned by corporate entities and for lands held in trust.

(47) Nonresident landowner: Any nonresident of Missouri who is the owner of at least seventy-five (75) acres in one (1) contiguous tract in the state of Missouri, or any member of the immediate household whose legal residence and domicile is the same as the nonresident landowner's for at least thirty (30) days last past. **For the purposes of this definition, settlors, revocable, and permissible distributees are defined as found in section 456.1-103, RSMo. In the case of corporate ownership of land or land held in trust, persons defined as nonresident landowners include nonresidents of Missouri who are –**

(A) General partners of resident or foreign limited liability partnerships, limited partnerships, or limited liability limited partnerships, and general partners of general partnerships formed by written agreement;

(B) Officers of resident or foreign corporations;

(C) Managing members of resident or foreign limited liability companies;

(D) Officers of benevolent associations organized pursuant to Chapter 352, RSMo;

(E) Settlers of a revocable trust; and

(F) Permissible distributees of an irrevocable trust.

(56) Resident Landowner: Any Missouri resident who is the owner of at least five (5) acres in one (1) contiguous tract, or any member of the immediate household whose legal residence or domicile is the same as the landowner's for at least thirty (30) days last past, except ownership of at least (20) acres in one (1) contiguous tract is required to qualify for resident landowner privileges to hunt bears, deer, elk, and turkey. For the purposes of this definition, settlors, revocable, and permissible distributees are defined as found in [S]section 456.1-103 [of the Revised Statutes of Missouri], RSMo. In the case of corporate ownership of land or land held in trust, persons defined as **resident** landowners include [Missouri] residents of **Missouri** who are –

(A) General partners of resident **or foreign** limited liability partnerships, limited partnerships, or limited liability limited partnerships, and general partners of general partnerships formed by written agreement;

(C) Managing members of resident **or foreign** limited liability companies;

(D) Officers of benevolent associations organized pursuant to Chapter 352 [of the Revised Statutes of Missouri], RSMo;

AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const., and section 252.040, RSMo 2016. This rule previously filed as 3 CSR 10-11.805. Original rule filed April 30, 2001, effective Sept. 30, 2001. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 23, 2024.

PUBLIC COST: This proposed amendment will cost state agencies or political subdivisions an estimated eleven thousand three hundred fifty-six dollars (\$11,356) annually.

PRIVATE COST: This proposed amendment will cost private entities an estimated fourteen thousand seven hundred fifty-three dollars (\$14,753) annually.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with Regulations Committee Chairman, Department of

Conservation, PO Box 180, Jefferson City, MO 65102-0180, or via the department's website at <https://short.mdc.mo.gov/Z49>. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.

FISCAL NOTE
PUBLIC COST

- I. Department Title: Department of Conservation
Division Title: Title 10 – Conservation Commission
Chapter Title: Chapter 20 Definitions

Rule Number and Name:	3 CSR 10-20.805 Definitions
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Missouri Department of Conservation	\$11,356 (annual lost revenue in permit sales)

III. WORKSHEET

Qualifying Nonresident (NR) Landowners are eligible to receive deer and turkey hunting permits for hunting on their property for a reduced fee as compared to other NR deer and turkey hunters. Changing the NR Landowner definition to include land held in trust and corporate ownership is expected to increase the number of NR landowner permits sold; however, because of the reduced fee for NR landowner permits, it is expected to result in a decrease in permit revenue to the department (see below assumptions).

Based upon an analysis of NR landowner permit sales between 2020 and 2023, information gathered during post-season NR landowner permit audits/verifications since 2020, and requests from the public to modify the NR landowner definition to include land held in trust and corporate ownership, the Department estimates a 10% increase to the number of NR landowner deer and turkey hunting permits sold from the pool of hunters that were already obtaining NR deer and turkey hunting permits.

\$6,720 (Estimated lost revenue - NR Firearm Any Deer Permit sales) + \$2,940 (Estimated lost revenue - NR Archers Permit sales) + \$1,534 (Estimated lost revenue - NR Spring Turkey Hunting Permit sales) + \$162 (Estimated lost revenue – NR Fall Turkey Hunting Permit sales) = \$11,356 (Annual lost revenue in permit sales/estimated cost of compliance)

The following data and calculations were used to determine the above estimated cost of compliance:

Permit Type	NR Permit Fee	NR Landowner Permit Fee	Permit Fee Difference
Firearms Any-Deer	\$265	\$195	\$70
Archers Hunting	\$265	\$195	\$70
Spring Turkey	\$224	\$165	\$59
Fall Turkey	\$150	\$96	\$54

NR Landowner Permit Type	# Permits Issued in 2023	Estimated % Increase to NR Landowner Permits Issued	Estimated Increase NR Landowner Permits Issued
Firearms Any-Deer	959	10%	96
Archers Hunting	422	10%	42
Spring Turkey	260	10%	26
Fall Turkey	27	10%	3

\$70 (Permit fee difference between a NR Firearm Any-Deer Hunting Permit and a NR Firearm Landowner Any-Deer Permit) X 96 (Estimated increase of NR Landowner Any-Deer Permits issued) = **\$6,720 (Estimated lost revenue - NR Firearm Any Deer Permit Sales)**

\$70 (Permit fee difference between a NR Archers Hunting Permit and a NR Landowner Archers Hunting Permit) X 42 (Estimated increase of NR Landowner Archers Permits issued) = **\$2,940 (Estimated lost revenue - NR Archers Permit sales)**

\$59 (Permit fee difference between a NR Spring Turkey Hunting Permit and a NR Landowner Spring Turkey Hunting Permit) X 26 (Estimated increase of NR Landowner Spring Turkey Hunting Permits issued) = **\$1,534 (Estimated lost revenue - NR Spring Turkey Hunting Permit sales)**

\$54 (Permit fee difference between a NR Fall Turkey Hunting Permit and a NR Landowner Fall Turkey Hunting Permit) X 3 (Estimated increase of NR Landowner Fall Turkey Hunting Permits issued) = **\$162 (Estimated lost revenue - NR Fall Turkey Hunting Permit sales)**

I. ASSUMPTIONS

The estimate assumes the following:

- Ten percent of the estimated increase to the number of NR landowner permits will be from the pool of existing NR deer and turkey hunters, and any person obtaining a NR Landowner permit would have purchased a full-price NR permit if they were not a qualifying NR Landowner.
- For ten percent of the NR Landowner deer or turkey hunting permits sold, there will be a corresponding decrease to the number of NR deer and turkey hunting permits sold.
- The number of NR landowner permits sold will stabilize after the first year the rule goes into effect.
- All calculations in data tables are rounded to the nearest whole number.

**FISCAL NOTE
PRIVATE COST**

- I. **Department Title: Department of Conservation**
Division Title: Division 10 – Conservation Commission
Chapter Title: Chapter 20 Definitions

Rule Number and Name:	3 CSR 10-20.805 Definitions
Type of Rulemaking:	Proposed Amendment

II. **SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the rule:	Classification by types of business entities which would likely be affected:	Estimated in the aggregate as to the cost of compliance with the rule by the affected entities:
83 NR Deer and Turkey Hunters	New NR Landowner Deer and Turkey Hunters	\$14,753 (annual NR Landowner Permit Fees)

III. **WORKSHEET**

Qualifying Nonresident (NR) Landowners are eligible to receive deer and turkey hunting permits for hunting on their property for a reduced fee as compared to other NR deer and turkey hunters. Changing the NR Landowner definition to include land held in trust and corporate ownership is expected to increase the number of NR landowner permits sold to new NR deer and turkey hunters.

Based upon an analysis of NR landowner permit sales between 2020 and 2023, information gathered during post-season NR landowner permit audits/verifications since 2020, and requests from the public to modify the NR landowner definition to include land held in trust and corporate ownership, the Department estimates a 5% increase to the number of NR landowner deer and turkey hunting permits that will be sold to new NR deer and turkey hunters.

\$9,360 (NR Landowner Firearm Any Deer Permit fees) + \$4,095 (NR Landowner Archers Permit fees) + \$1,248 (NR Landowner Spring Turkey Hunting Permit fees) + \$54 (NR Fall Turkey Hunting Permit fees) = \$14,753 (Annual NR Landowner Permit Fees/estimated cost of compliance)

The following data and calculations were used to determine the above estimated cost of compliance:

Permit Type	NR Landowner Permit Fee
Firearms Any-Deer	\$195
Archers Hunting	\$195
Spring Turkey	\$165
Fall Turkey	\$96

NR Landowner Permit Type	# Permits Issued in 2023	Estimated % Increase to NR Landowner Permits Issued	Estimated Increase NR Landowner Permits Issued
Firearms Any-Deer	959	5%	48
Archers Hunting	422	5%	21
Spring Turkey	260	5%	13
Fall Turkey	27	5%	1

\$195 (NR Firearm Landowner Any-Deer Permit Fee) X 48 (Estimated increase of NR Landowner Any-Deer Permits issued) = **\$9,360 (NR Landowner Firearm Any Deer Permit fees)**

\$195 (NR Landowner Archers Hunting Permit Fee) X 21 (Estimated increase of NR Landowner Archers Permits issued) = **\$4,095 (NR Landowner Archers Permit fees)**

\$96 (Permit fee difference between a NR Spring Turkey Hunting Permit and a NR Landowner Spring Turkey Hunting Permit) X 13 (Estimated increase of NR Landowner Spring Turkey Hunting Permits issued) = **\$1,248 (NR Landowner Spring Turkey Hunting Permit fees)**

\$54 (Permit fee difference between a NR Fall Turkey Hunting Permit and a NR Landowner Fall Turkey Hunting Permit) X 1 (Estimated increase of NR Landowner Fall Turkey Hunting Permits issued) = **\$54 (NR Landowner Fall Turkey Hunting Permit fees)**

IV. ASSUMPTIONS

The estimate assumes the following:

- Five percent of the estimated increase to the number of NR landowner permits will be issued to new NR deer and turkey hunters.
- The number of NR landowner permits sold will stabilize after the first year the rule goes into effect.
- All calculations in data tables are rounded to the nearest whole number.

**TITLE 9 – DEPARTMENT OF MENTAL HEALTH
Division 45 – Division of Developmental Disabilities
Chapter 7 – Developmental Disabilities Health Home**

PROPOSED RULE

9 CSR 45-7.010 Developmental Disabilities Health Home

PURPOSE: This rule establishes the requirements for designation as a Developmental Disabilities (DD) Health Home by the Missouri Department of Mental Health (DMH), Division of Developmental Disabilities (Division of DD), for the Missouri Department of Social Services (DSS), MO HealthNet Division (MHD), to support individuals with intellectual and developmental disabilities who have chronic conditions and are served by the Division of DD.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material is incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) Definitions.

(A) Behavioral Health—The promotion of mental health, resilience, and well-being, the treatment of mental health and substance use disorders, and the support of individuals who experience and/or are in recovery from these conditions, along with their family or other natural supports, and communities.

(B) Centers for Medicare & Medicaid Services (CMS)—CMS is a federal agency within the United States Department of Health and Human Services that administers Medicaid programs.

(C) Chronic or At-Risk Conditions—For the purpose of DD Health Home eligibility, chronic or at-risk conditions are as follows:

1. Intellectual and/or developmental disability;
2. Diabetes;
3. Asthma;
4. Cardiovascular disease (CVD) or hypertension;
5. Chronic obstructive pulmonary disease (COPD);
6. Overweight (body mass index (BMI)>25);
7. Dementia;
8. Dependent on a ventilator;
9. One (1) of the Fatal Five Plus conditions or one (1) or more chronic conditions that could lead to one (1) of the following Fatal Five Plus conditions:
 - A. Pulmonary aspiration;
 - B. Bowel obstruction;
 - C. Gastroesophageal reflux disease (GERD);
 - D. Seizures;
 - E. Sepsis;
 - F. Dehydration;
10. Tobacco use;
11. Diagnosis of Autism Spectrum Disorder; and
12. Healthcare level of 3 or greater as identified by the Health Risk Screening Tool.

(D) EMR—Electronic medical records, also referred to as electronic health records (EHR).

(E) Health Home—A Health Home provides coordination of health care to individuals with chronic physical and/or behavioral health conditions, using a partnership or team approach between the Health Home team and individuals in order to achieve improved health care, to avoid preventable

hospitalizations and emergency department use.

(F) DD Health Home Enrollees—Individuals eligible for Division of DD services with one (1) or more chronic/at risk conditions as defined in enrollment/eligibility criteria section.

(G) DD Health Home Provider—DD Contracted Targeted Case Management (TCM) and/or DD Home and Community-Based Services (HCBS) certified or accredited waiver providers who meet criteria for DD health home provider eligibility.

(H) DD Health Home Team—DD Health Home core team shall consist of the following staff: Health Home Director, Nurse Care Manager, Physician Consultant (Advanced Practice Registered Nurse (APRN) as substitute and defined in the *DD Health Home Provider Operations Manual*), Specialized Healthcare Consultant, and DD Health Home Facilitator. Based on the unique needs of the individual, additional staff may be identified.

(I) Health Risk Screening Tool—The Health Risk Screening Tool (HRST) is a tool used to provide early detection of health risks and destabilization.

(J) Health Risk Support Plan (HRSP)—The HRSP are standardized electronic templates in the department's identified system which is a component of the individual's Individual Support Plan (ISP) and serves to identify implementation strategies to mitigate risk and improve health outcomes.

(K) Intellectual and/or Developmental Disability (IDD)—Adults and youth who meet the Missouri state statute definition of Developmental Disability, section 630.005(9), RSMo. "Developmental disability," a disability that is attributable to intellectual disability, cerebral palsy, epilepsy, head injury or autism, or a learning disability related to a brain dysfunction; or any other mental or physical impairment or combination of mental or physical impairments; and is manifested before the individual attains age twenty-two (22); and is likely to continue indefinitely; and results in substantial functional limitations in two (2) or more of the following areas of major life activities: self-care; receptive and expressive language development and use; learning; self-direction; capacity for independent living or economic self-sufficiency; mobility; and reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic care, habilitation or other services which may be of lifelong or extended duration and are individually planned and coordinated.

(L) Missouri Department of Social Services (DSS), MO HealthNet Division (MHD)—Single State Medicaid authority.

(M) Social Determinants of Health (SDOH), the nonmedical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, racism, climate change, and political systems.

(2) Developmental Disabilities Health Home Qualifications.

(A) Initial Provider Qualifications. In addition to being a DD service provider of TCM or DD HCBS waiver services, each DD Health Home provider must meet state qualifications, which may be amended from time to time as necessary and appropriate, but minimally require that each Health Home—

1. Must be enrolled in Missouri's Medicaid program and agree to comply with all Medicaid program requirements;

2. DD Health Home providers can either directly provide, or subcontract for the provision of DD Health Home services. The DD Health Home remains responsible for all DD Health Home program requirements, including services performed by the contractor;

3. Have strong, engaged leadership personally committed to and capable of leading the practice through the transformation process and sustaining transformed practices processes as demonstrated through the application process and agreement to participate in learning activities including in-person sessions and regularly scheduled phone calls; and that provider leadership in collaboration with the state have presented the state-developed introductory presentation to Missouri's DD Health Home initiative to provider staff and board of directors;

4. Meet the state's minimum access requirements as follows: Prior to implementation of DD Health Home service coverage, provide assurance of enhanced individual access to the health team, including the development of alternatives to face-to-face visits, such as telephone or email, twenty-four (24) hours per day seven (7) days per week;

5. Actively use MHD and DMH information technology (IT) systems to conduct care coordination and prescription monitoring for Medicaid individuals;

6. Utilize the department's identified system to input annual metabolic screening results, track and measure care of individuals, automate care reminders, and maintain other items as required by the department;

7. Routinely use an electronic health management tool to determine individualized health risks (i.e., Health Risk Screening Tool (HRST));

8. Routinely use an electronic health management tool to determine problematic prescribing patterns;

9. Conduct wellness interventions as indicated based on the individual's level of risk;

10. Agree to convene regular, ongoing, and documented internal DD Health Home team meetings to plan and implement DD Health Home healthcare goals and objectives of ongoing practice transformation;

11. Agree to participate in CMS and state-required evaluation activities;

12. Agree to develop required reports describing DD Health Home activities, efforts and progress in implementing DD Health Home services;

13. Maintain compliance with the terms and conditions as a DD Health Home provider or risk termination as a provider of DD Health Home services;

14. Present a proposed DD Health Home service delivery model the department determines will have a reasonable likelihood of being cost-effective. Cost effectiveness will be determined based on the size of the proposed DD Health Home, Medicaid caseload, percentage of caseload with eligible chronic conditions of individuals and other factors to be determined by DMH.

(B) Ongoing Provider Qualifications. Each provider must also –

1. Continue to have a strong, engaged leadership personally committed to and capable of leading the DD Health Home through the transformation process and sustaining transformed DD Health Home processes as evidenced by successful participation in the leadership training and learning collaborative developed for DD Health Home;

2. Coordinate care and build relationships with regional hospital(s) or hospital system(s) to develop a structure for transitional care planning, including communication of inpatient admissions of DD Health Home individuals, and maintain a mutual awareness and collaboration to identify individuals seeking emergency department services who might benefit from connection with a DD Health Home, and encourage hospital staff to notify the area DD Health Home staff of such opportunities;

3. Develop quality improvement plans to address gaps and opportunities for improvement identified during and after the application process;

4. Demonstrate development of fundamental DD Health Home functionality through an assessment process to be applied by Division of DD;

5. Demonstrate significant improvement on clinical indicators specified by and reported to Division of DD;

6. Submit data reports as required by DSS and/or Division of DD;

7. Provide DD Health Home services that demonstrate overall cost effectiveness;

8. Participate in technical assistance conference calls and webinars as requested by DSS and/or Division of DD;

9. Meet standards as determined by DMH.

(3) Scope of Services. This section describes the activities Division of DD providers will be required to engage in, and the responsibilities they will fulfill, if recognized as a DD Health Home.

(A) Division of DD Health Home Services. The DD Health Home Team shall assure the following health services are received, as necessary, by all individuals served in the DD Health Home:

1. Comprehensive care management. Comprehensive care management services include –

A. Determining level of participation in care management services based upon individualized information provided through the HRST and HRSP, and other individual information;

B. Assessment of preliminary service needs which includes reviewing and identifying gaps in the overall person-centered plan which may include the HRSP and Behavior Support Plan (BSP);

C. DD Health Home development of individual DD Health Home healthcare goals, preferences, and optimal clinical outcomes;

D. Assigning health team roles and responsibilities;

E. Developing guidelines for health teams to follow across risk levels or health conditions;

F. Monitoring of individual and population health status and service use to determine adherence to or variance from DD Health Home healthcare goals and identified service needs identified in the overall person-centered plan; and

G. Developing and disseminating reports that indicate the individual's progress toward meeting outcomes for individual satisfaction, health status, service delivery, and costs.

2. Care coordination. Care coordination is the implementation of the overall individual person-centered plan with active individual and family involvement through appropriate linkages, referrals, coordination, and follow-up to needed services and supports. Care coordination is designed to be delivered in a flexible manner best suited to the individual's preferences and to support DD Health Home healthcare goals that have been identified by developing linkages and skills in order to allow the individual to reach their full potential and increase their independence in obtaining and accessing services. Specific activities include but are not limited to –

A. Participating in hospital discharge processes to support the individual's transition to the community;

B. Communicating and consulting with the individual, providers, and collateral contacts; and

C. Facilitating regularly scheduled interdisciplinary team meetings to review person-centered plans and assess progress toward identified DD Health Home healthcare goals.

3. Health promotion. Health promotion shall minimally consist of educating and engaging the individual in making decisions that promote independent living skills and lifestyle choices that achieve the following goals:

- A. Good health;
- B. Proactively managing chronic conditions;
- C. Identifying risk factors early; and
- D. Screening for emerging health problems.

4. Health promotion services include but are not limited to –

A. Promoting the individual's education of their chronic conditions;

B. Developing self-management plans with the individual;

C. Conducting medication reviews and regimen compliance;

D. Providing support to the individual for improving social networks and health-promoting lifestyle interventions, including but not limited to preventative health practices for the IDD population, nutritional counseling, obesity reduction and prevention, and increasing physical activity; and

E. Assisting the individual to participate in DD Health Home healthcare goal planning with an emphasis on person-centered empowerment and the development of health literacy skills to help the individual understand and self-manage chronic health conditions.

5. Comprehensive transitional care from inpatient to other settings. Comprehensive transitional care services include but are not limited to –

A. Facilitating the individual's transition between care levels, such as a hospital, nursing facility and residential supports, or when opting for a new DD Health Home provider;

B. Collaborating and establishing relationships with the individual's physicians, nurses, social workers, discharge planners, pharmacists, and others to continue implementation of the overall person-centered plan. Specific focus is on increasing the individual's ability to manage care and live safely in the community, and shift the use of reactive care and treatment to proactive health promotion and self-management;

C. Communicating with and educating the individual and providers located at the setting from which the individual is transitioning, and at the setting to which the individual is transitioning;

D. Ensuring the individual's prompt access to follow-up care after discharge (e.g., care record from discharge entity, medication reconciliation, reviewing person-centered plan to assure access to needed community services, appointment scheduling); and

E. Providing care coordination services designed to streamline person-centered plans, reduce hospital admissions, ease the transition to long term services and supports, and interrupt patterns of frequent hospital emergency department use.

6. Individual and family support. Individual and family support is intended to assist the individual to facilitate and maintain quality of life and explore community options to promote overall quality of life through health stabilization and improved health outcomes. Activities include but are not limited to –

A. Educating and guiding in self-advocacy support with the individual;

B. Increasing the individual's health literacy skills and ability to self-manage their care;

C. Identifying resources for the individual to address the gaps identified in the overall person-centered plan to improve

his or her overall health and ability to function within his or her family and in the community;

D. Educating the individual on the importance of obtaining and adhering to medications and other prescribed treatments; and

E. Assisting the individual with developmental disabilities for whom primary services needs are more directly related to treatment (e.g., treatment for a behavioral health condition and/or particular healthcare condition(s)), referring and coordinating with the approved care management entity for the MO Community Mental Health Center (CMHC) Health Care Home or MO Primary Care Health Home for services more directly related to those aforementioned conditions.

7. Referral to community and social support services. Referral to community and social support services involves identifying gaps in the overall person-centered plan that are connecting the individual to community based resources and referrals that support Social Determinants of Health (SDOH). It also includes identifying resources to reduce barriers that will promote the individual's overall quality of life through health stabilization and improved overall health outcomes.

(B) DD Health Home Administration. Each DD Health Home provider shall employ a DD Health Home Director. The DD Health Home core team shall consist of the following staff: Nurse Care Manager, Physician Consultant (APRN as a substitute and defined in the *DD Health Home Provider Operations Manual*), Specialized Healthcare Consultant, and DD Health Home Facilitator. Based on the unique needs of the individual, additional staff may be identified.

(C) Learning Activities. The MO DD Health Homes will be supported as the state continually assesses the DD Health Homes to determine training needs. DD Health Homes will participate in a variety of centralized learning supports including but not limited to learning collaboratives, webinars, training and technical assistance including peer-led training and community resources.

(D) Department's Identified System. DD Health Homes shall utilize the department's identified system approved by the Division of DD. The department's identified system is a system for tracking information the Division of DD deems critical to the management of the health of the population being served through the DD Health Home, including dates of delivered and needed services, laboratory values needed to track chronic conditions, and other measures of health status. The department's identified system shall be used for –

- 1. Tracking;
- 2. Risk stratification;
- 3. Analysis of population health status and individual needs; and
- 4. Reporting as specified by the Division of DD.

(E) Data Reporting. DD Health Homes shall be required to submit the following reports to the Division of DD as specified:

- 1. Monthly updates identifying the DD Health Home's staffing patterns, enrollment status, hospital follow-ups, and notifications provided to primary healthcare providers; and
- 2. Other reports as specified by the Division of DD.

(4) Patient Eligibility and Enrollment. This section describes eligibility and enrollment requirements for DD Health Home.

(A) Eligibility. Individuals eligible for Division of DD services shall meet the following criteria to be eligible for services from a designated DD Health Home:

- 1. Have a chronic condition of intellectual and/or developmental disability; and
- 2. Have or be at risk of developing one (1) of the following conditions:

A. Diabetes;
 B. Asthma;
 C. Cardiovascular disease (CVD) or hypertension;
 D. Chronic obstructive pulmonary disease (COPD);
 E. Overweight (body mass index (BMI)>25);
 F. Dementia;
 G. Dependent on a ventilator;
 H. One (1) of the Fatal Five Plus conditions or one (1) or more chronic conditions that could lead to one (1) of the following Fatal Five Plus conditions:
 (I) Pulmonary aspiration;
 (II) Bowel obstruction;
 (III) Gastroesophageal reflux disease (GERD);
 (IV) Seizures;
 (V) Sepsis;
 (VI) Dehydration;
 I. Tobacco use;
 J. Diagnosis of Autism Spectrum Disorder; or
 K. Healthcare level of 3 or greater as identified by the Health Risk Screening Tool.

(B) Enrollment Requirements. Individuals eligible for DD Health Home services will be assigned to eligible providers. Upon enrollment, individuals assigned to a DD Health Home will be informed by the Department of Mental Health. The notice will describe assignment of the individual to a DD Health Home, provide a brief description of DD Health Home services, and describe the process for the individual to change DD Health Home provider, and opt-out of receiving services from the assigned DD Health Home provider.

(5) DD Health Home Provider Designation Process.

(A) The Division of DD shall establish procedures under which a Medicaid-enrolled provider attains designation as a DD Health Home provider.

1. The designation process shall be person-centered and serve the following critical purposes –

A. To determine how well DD Health Home providers fulfill their responsibilities to individuals enrolled in a DD Health Home; and

B. To determine systems changes and practices needed so that DD Health Home providers will be more responsive to the individual's needs;

2. DD Health Home providers shall demonstrate innovation and initiative in pursuing, as well as commitment toward continuous quality improvement in realizing best practices and outcomes associated with –

A. Health Home core functional components –

(I) Provide quality-driven, cost-effective, culturally appropriate, and person- and family-centered Health Home services;

(II) Coordinate access to high quality health care services informed by evidence-based clinical practice guidelines;

(III) Coordinate access to preventive and health promotion services, including prevention of mental illness and substance use disorders;

(IV) Coordinate and provide access to behavioral health services, including mental health and substance use;

(V) Coordinate access to comprehensive care management, care coordination, and transitional care across settings. Transitional care includes appropriate follow-up from inpatient to other settings, such as participation in discharge planning and facilitating transfer from a pediatric to an adult system of health care;

(VI) Coordinate access to chronic disease management, including self-management support to

individuals and their families;

(VII) Coordinate access to individual and family supports, including referral to community, social support, and recovery services;

(VIII) Coordinate access to long-term care supports and services;

(IX) Develop a person-centered care plan for each individual that coordinates and integrates all of his or her clinical and non-clinical healthcare-related needs and services;

(X) Demonstrate a capacity to use health information technology to link services, facilitate communication among team members and between the health team and individual and family caregivers, and provide feedback to practices, as feasible and appropriate; and

(XI) Establish a continuous quality improvement program, and collect and report on data that permits an evaluation of increased coordination of care and chronic disease management on individual-level clinical outcomes, experience of care outcomes, and quality of care outcomes at the population level; and

B. Service delivery system principles –

(I) Demonstrate clinical competency for serving the complex needs of health home enrollees using evidence-based protocols;

(II) Demonstrate the ability for effectively coordinating the full range of medical, behavioral health, long-term services and supports, and social services for medically complex individuals with chronic conditions;

(III) Provide Health Home services that operate under a “whole-person” approach to care using a comprehensive needs assessment and an integrated person-centered care planning process to coordinate care;

(IV) Have conflict of interest safeguards in place to assure enrollee rights and protections are not violated, and that services are coordinated in accordance with enrollee needs expressed in the person-centered care plan;

(V) Provide access to timely health care twenty-four (24) hours a day, seven (7) days a week to address any immediate care needs of their Health Home enrollees;

(VI) Have in place operational protocol, as well as communication procedures to assure care coordination across all elements of the healthcare system (hospitals, specialty providers, social service providers, other community based settings, etc.);

(VII) Have protocols for ensuring safe care transitions, including established agreements and relationships with hospitals and other community-based settings;

(VIII) Establish a continuous quality improvement program that includes a process for collection and reporting of Health Home data for quality monitoring and program performance; permits evaluation of increased coordination and chronic disease management on individual-level clinical outcomes, experience of care outcomes, and quality of care outcomes at the population level;

(IX) Use data for population health management, tracking tests, referrals and follow-up, and medication management;

(X) Use health information technology to link services and facilitate communication among interdisciplinary team members and other providers to coordinate care and improve service delivery across the care continuum.

3. Upon initial application and on a biennial basis thereafter, all DD Health Home providers shall seek DD Health Home designation under this section except those providers appropriately accredited by nationally recognized accrediting

bodies for DD Health Homes approved by Division of DD shall not be required to seek designation. The division director shall issue a DD Health Home designation to providers successfully completing the process and requirements of this section.

(B) The Division of DD recognizes and deems as designated a provider that has attained full accreditation under standards for DD Health Home from a nationally recognized accrediting body. The deemed provider must –

1. Submit to the Division of DD a copy of the most recent accreditation survey report and verification of the accreditation time period and dates within thirty (30) calendar days of receipt from the accrediting body.

2. Notify the Division of DD when accreditation surveys are scheduled or when the accrediting body makes complaint investigation visits.

3. Notify the Division of DD of any changes in accreditation status during the time period of accreditation and resurvey.

4. Identify the Division of DD as a primary stakeholder for contact by the accrediting body during survey and resurvey data-gathering processes.

5. The Division of DD may conduct a scheduled or unscheduled survey of an accredited DD Health Home provider at any time to monitor ongoing compliance with the standards and requirements. If any survey finds conditions that are not in compliance with applicable standards, the Division of DD may require corrective action steps and may change the provider's designation status consistent with procedures set out in this rule.

(C) Participation in Designation. Participation may entail responding to surveys and requests for interviews with DD Health Home staff and individuals served. Providers shall provide all requested information as directed by the Division of DD. A provider must engage in the designation process in good faith. The provider must provide information and documentation that is accurate and complete. Failure to participate in good faith, including falsification or fabrication of any information used to determine compliance with requirements, may be grounds to deny issuance of or to revoke designation.

1. The Division of DD shall conduct a comprehensive survey at an organization for the purpose of determining compliance with DD Health Home standards, standards of care, program/service rules, and other requirements, except as stipulated in paragraph (5)(A)3.

- A. The Division of DD shall provide advance notice and scheduling of routine, planned surveys.

- B. The Division of DD shall notify the applicant regarding survey date(s), procedures, and a copy of any survey instrument that may be used. Survey procedures will include but are not limited to interviews with provider staff, individuals being served, and other interested parties; review of provider administrative records necessary to verify compliance with requirements; and review of personnel records and service documentation.

- C. The applicant agrees, by act of submitting a DD Health Home application, to allow and assist Division of DD representatives in fully and freely conducting these survey procedures, initially and ongoing, and to provide Division of DD representatives reasonable and immediate access to premises, individuals, and requested information.

- D. The surveyor(s) shall hold entrance and exit conferences with the organization to discuss survey arrangements and survey findings, respectively. If there are any deficiencies found during the survey, the provider will be required to submit a plan of correction before designation can be approved.

- E. If a plan of correction is not required, the Division of DD shall issue DD Health Home designation to the provider's director within thirty (30) calendar days after the exit conference, indicating the DD Health Home provider can provide Health Home services.

- F. Division of DD will identify and set timelines for issues/enhancements to be addressed with the DD Health Home provider. At the discretion of the Division of DD, a follow-up review will be completed once issues have been addressed. If issues/enhancements have been satisfactorily addressed, Division of DD will issue DD Health Home designation to the provider.

- (I) The report shall note all deficiencies identified during the survey.

- (II) The Division of DD shall send a notice of deficiency and the report.

- (III) The DD Health Home provider shall make the report available to their staff and to the public upon request.

- (IV) Within thirty (30) calendar days of the date that a notice of deficiency and the report is presented to the DD Health Home provider, the provider shall submit to the Division of DD a plan of correction. The plan must address each deficiency, specifying the method of correction and the date the correction shall be completed. The provider will work with the Division of DD to develop a plan of correction. No correction date will exceed ninety (90) calendar days.

- (V) Within fifteen (15) calendar days after receiving the plan of correction, the Division of DD shall notify the DD Health Home provider of its decision to approve or require revisions of the proposed plan.

- (VI) The Division of DD will assure that the plan of correction has been implemented and deficiencies corrected. Division of DD shall determine if it is necessary to make a return visit to the DD Health Home provider based on the criteria of the plan of correction.

- (VII) In the event that the provider has not submitted a plan of correction acceptable to Division of DD within forty-five (45) calendar days of the original date that written notice of deficiencies was presented by certified mail to the DD Health Home provider, it shall be subject to expiration or denial of designation.

- G. The Division of DD may grant designation on a temporary, initial, conditional, deemed, or compliance status. The Division of DD will notify the Division of DD Director of any change in the status of a provider.

- (I) Temporary status may be granted to a DD Health Home provider if the designation process has not been completed prior to the expiration of an existing designation and the applicant is not at fault for failure or delay in completing the designation process.

- (II) Initial status for a period of not exceeding one (1) year may be granted to a new provider based on a designation review which finds the program in compliance with requirements related to policy and procedure, facility, trainings and personnel to begin providing services. The initial designation will be awarded for one (1) year and a follow-up visit will occur prior to the initial designation expiration date to ensure the DD Health Home provider is demonstrating continued improvement and functionality.

- (a) In the Division of DD's initial determination and granting of initial designation, the provider shall not be expected to fully comply with those standards which reflect ongoing program activities.

- (b) The Division of DD shall conduct a comprehensive survey of the initially designated provider and shall make further determination of the provider's

designation status no later than the expiration date of the initial designation.

(III) Conditional status may be granted to a provider following a survey by the Division of DD that determines that there are pervasive and/or significant deficiencies with standards that may affect quality of care to individuals and there is reasonable expectation that the provider can achieve compliance within a stipulated time period. The Division of DD may consider patterns and trends of performance identified during the survey.

(a) The period of conditional status shall not exceed one hundred eighty (180) calendar days. The Division of DD may directly monitor progress, may require the provider to submit progress reports, or both.

(IV) The Division of DD shall conduct a further survey within the one hundred eighty (180)-day period and make a further determination of the provider's compliance with standards.

(V) Designation status may be awarded to a provider for a period of two (2) years following a survey by the Division of DD that determines the provider meets all standards relating to quality of care and the safety, health, rights, and welfare of individuals served.

H. If deficiencies are cited during a survey, any and all such deficiencies must be corrected in accordance with the plan of correction prior to the Division of DD awarding designation status.

I. The Division of DD may investigate any complaint regarding the operation of a designated or deemed provider. If conditions are found that are not in compliance with applicable requirements, the Division of DD may, at its sole discretion for deemed providers, notify the accrediting body of any concerns.

J. The Division of DD may conduct a scheduled or unscheduled survey of a provider at any time to monitor ongoing compliance with the standards and requirements. If any survey finds conditions that are not in compliance with applicable standards, the Division of DD may require corrective action steps and may change the provider's designation status consistent with procedures set out in this rule.

K. The Division of DD may deny issuance of and may revoke designation based on a determination that includes but is not limited to –

(I) The nature of the deficiencies results in substantial probability of or actual jeopardy to individuals being served;

(II) Serious or repeated incidents of abuse or neglect of individuals being served or violations of rights have occurred;

(III) Fraudulent fiscal practices have transpired or significant and repeated errors in billings to the Division of DD have occurred;

(IV) Failure to participate in the designation process in good faith, including falsification or fabrication of any information used to determine compliance with requirements;

(V) The nature and extent of deficiencies results in the failure to conform to the standards of the program being offered; or

(VI) Compliance with standards has not been attained by an organization upon expiration of conditional designation.

L. An organization which has had designation denied or revoked may meet with the Division of DD Director or designee to appeal the decision to revoke designation.

(I) The provider must notify the department's division director or designee in writing within ten (10) business days of the date on the termination letter. The appeal shall include the following –

(a) The name of the provider;

(b) The name and contact information of the person requesting the appeal;

(c) The reasons for appealing the decision; and

(d) Any documentation that supports the provider's position.

(II) The meeting shall take place within seven (7) business days from the date of the request.

(III) Within seven (7) business days of the meeting, the division director or designee shall make a final determination as to whether the decision remains in effect. The provider shall be notified of this decision by regular and certified mail.

(IV) The decision of the division director or designee shall be the final decision of the department.

M. A designation is valid only as long as the provider meets standards of care and other requirements.

N. The provider shall maintain the designation issued by the Division of DD in a readily available location.

O. Within seven (7) business days of the time a designated provider organization is discontinued, moved to a new location, or has a change in accreditation status, the provider shall provide written notice to the Division of DD of any such change.

P. The Division of DD shall designate only the provider(s) named in the application.

Q. The provider(s) may not transfer designation without the written approval of the department.

R. Within seven (7) calendar days of the effective date that a designated provider is sold or undergoes a change of ownership, the provider shall submit a written notice to the division of any such change. A change in ownership is considered to have occurred under the following circumstances:

(I) A new corporation, partnership, limited partnership, limited liability company, or other entity assumes ownership of the operation;

(II) An individual incorporates or forms a partnership;

(III) With respect to a designated provider which is a general partnership, a change occurs in the majority interest of the partners;

(IV) With respect to a designated provider which is a limited partnership, a change occurs in the majority interest of the general or limited partners;

(V) With respect to a designated provider which is a corporation, a change occurs in the persons who own, hold, or have the power to vote the majority of any class of stock issued by the corporation.

(VI) A designated provider's change of Federal Employer Identification Number (FEIN).

S. The organization must comply with other applicable requirements as set forth in 9 CSR 10-5.220 Privacy Rule of Health Insurance Portability and Accountability Act of 1996 (HIPAA).

(6) Demonstrated Evidence of DD Health Home Transformation.

(A) Providers are required to demonstrate evidence of transformation to the DD Health Home model on an ongoing basis using measures and standards established by the Division of DD and communicated to the providers. Transformation to the DD Health Home service delivery model is exhibited when a provider –

1. Demonstrates development of fundamental DD Health Home functionality initially upon enrollment, one (1) year prior to the expiration of the initial designation, and biennially thereafter, based on an assessment process determined by the Division of DD. Additional reviews may be indicated on a case-by-case basis. Providers must demonstrate continued

improvement and functionality for as long as they maintain their DD Health Home designation; and

2. Demonstrates progress toward established goals and objectives related to the clinical indicators as determined by Division of DD.

(B) Notification of Staffing Changes. Providers are required to notify the Division of DD within seven (7) business days of staff changes in the DD Health Home Director, Physician Consultant (APRN as substitute), Nurse Care Manager(s), and DD Health Home Facilitator.

(C) Providers shall work cooperatively with the Division of DD to support approved training, technology, and administrative services required for ongoing implementation and support of the DD Health Homes.

(7) Health Home Payment Components. This section describes the payment process for Developmental Disabilities Health Homes.

(A) General.

1. All payments to a DD Health Home are contingent on the program meeting the DD Health Home requirements set forth in their Health Home applications, as determined by the state of Missouri. Failure to meet such requirements is grounds for revocation of Health Home status and for termination of payments.

2. Reimbursement for DD Health Home services will be in addition to a provider's existing reimbursement for services and procedures and will not change existing reimbursement for services and procedures that are not part of the DD Health Home.

3. The Division of DD reserves the right to make changes to the payment methodology.

(B) Types of Payments.

1. Clinical Care Management per Member per Month (PMPM) payment. Missouri will pay DD Health Homes the cost of staff primarily responsible for delivery of services not covered by other reimbursement (Health Home Director, Physician Consultant (APRN as substitute), Nurse Care Manager, Specialized Healthcare Consultant and DD Health Home Facilitator), whose duties are not otherwise reimbursable by MO HealthNet. In addition, the DD Health Home PMPM will include Health Home specific training, technical assistance, administration, and data analytics. Staff costs are based on the Bureau of Labor Statistics data. All DD Health Home providers will receive the same PMPM rate. The PMPM method will be reviewed periodically to determine the rate is economically efficient and consistent with quality of care.

(C) Minimum Criteria for Payment.

1. The individual is identified as meeting the DD Health Home eligibility criteria on the state-run DD Health Home department's identified system.

2. The individual is enrolled with a designated billing DD Health Home provider, and is enrolled in only one (1) Health Home at a time, regardless of type.

3. The minimum DD Health Home service required to merit payment of the PMPM is that the individual has received care management monitoring for treatment gaps that was documented or another DD Health Home service was provided that was documented.

4. The DD Health Home will report that the minimal service required for the PMPM rate payment occurred on a monthly DD Health Home attestation report.

(D) Except as otherwise noted in the plan, state-developed PMPM rates are the same for both governmental and private providers of DD Health Home services.

(8) Policies and Procedures. The organization shall maintain a policy and procedure manual which accurately describes and guides the operation of its services and promotes compliance with applicable regulations. The policy and procedure manual shall be readily available to staff and the public upon request and shall include but is not limited to –

(A) The DD Health Home provider will develop policies and procedures in accordance with 9 CSR 10-5 to include –

1. 9 CSR 10-5.190 Background Screening Requirements;

2. 9 CSR 10-5.200 Report of Complaints of Abuse, Neglect and Misuse of Funds/Property;

3. 9 CSR 10-5.206 Report of Events; and

4. 9 CSR 10-5.220 Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA) and 42 CFR;

(B) The DD Health Home provider will develop policies and procedures to address the following:

1. Opt-out process for individuals that otherwise qualify for DD Health Home services;

2. Transfer and discharge processes for DD Health Home individuals;

3. Primary care physician referrals;

4. Primary care physician or other specialty care coordination;

5. Twenty-four (24) hour coverage in accordance with paragraph (2)(A)3. of this rule;

6. Prescription monitoring;

7. Health Risk Screening Tool and routine monitoring;

8. Quality assurance/quality improvement process as related to DD Health Home;

9. Guidelines to follow across risk levels or health conditions;

10. Follow-up care after discharge related to transitional care;

11. Training requirements for DD Health Home staff;

12. DD Health Home data reporting;

13. Composition of DD Health Home team;

14. Notification of DD Health Home staffing changes;

15. Utilization of the department's identified system;

16. Complaints and grievances; and

17. Attestation and documentation.

(9) Incorporation by Reference. This rule incorporates by reference the following:

(A) The *DD Health Home Provider Operations Manual* is incorporated by reference and made a part of this rule as published May 15, 2024, by the Department of Mental Health, Division of Developmental Disabilities, at its website at <https://dmh.mo.gov/dev-disabilities/health-home>. This rule does not incorporate any subsequent amendments or additions to this publication.

(10) Electronic Medical Records. DD Health Home providers are required to utilize and maintain electronic medical records of all individuals served. Electronic medical records systems must comply with state and federal regulations.

AUTHORITY: section 630.050, RSMo 2016. Original rule filed Feb. 26, 2024.

PUBLIC COST: This proposed rule is estimated to cost state agencies or political subdivisions \$24 million in the aggregate, of which \$2.4 million is state dollars and \$21.6 million is federal dollars.

PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Missouri Department of Mental Health, Denise Thomas, PO Box 687, Jefferson City, MO 65102 or by email to denise.thomas@dmh.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PUBLIC COST**

- I. Department Title:** Title 9 – Department of Mental Health
Division Title: Division 45 – Division of Developmental Disabilities
Chapter Title: Chapter 7 – Developmental Disabilities Health Home

Rule Number and Name:	9 CSR 45-7.010 Developmental Disabilities Health Home
Type of Rulemaking:	Proposed New Rule

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Mental Health	SFY 2025 – estimated \$24 million (\$2.4 million state share and \$21.6 million federal share)

III. WORKSHEET

DD Health Home Fiscal Impact - CSR

Projected DD Health Home Individuals	20,000
Estimated Monthly PMPM	\$ 100.00
Estimated Monthly Cost	\$ 2,000,000
	12
Estimated Annual Cost	\$ 24,000,000

SFY 2025 (7/1/2024 to 6/30/2025)

Estimated Monthly Cost	\$ 2,000,000
# of Months in FFY in Which Payment will be Made	12
Estimated FFY 2024 Cost	\$ 24,000,000
FMAP (90.00%)	\$ 21,600,000
GR (10.00%)	\$ 2,400,000
Estimated FFY 2024 Cost	\$ 24,000,000

IV. ASSUMPTIONS

See above Worksheet.

TITLE 12 – DEPARTMENT OF REVENUE
Division 10 – Director of Revenue
Chapter 10 – Financial Institutions

PROPOSED RESCISSION

12 CSR 10-10.140 Interest, Additions to Tax and Penalty. This rule established an effective period for computing interest, additions to tax and penalty as provided in section 148.062, RSMo.

PURPOSE: This rule is being rescinded because it is outdated and covered under other rules and updated RSMo information.

AUTHORITY: section 148.100, RSMo 1986. Original rule filed March 2, 1987, effective Aug. 13, 1987. Rescinded: Filed Feb. 20, 2024.

PUBLIC COST: This proposed rescission will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rescission will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rescission with the Missouri Department of Revenue, Legislative Office, 301 W. High Street, Room 218, Jefferson City, MO 65109-0475. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 10 – Nursing Home Program

PROPOSED AMENDMENT

13 CSR 70-10.020 Prospective Reimbursement Plan for Nursing Facility and HIV Nursing Facility Services. The division is amending sections (11) and (12).

PURPOSE: This amendment provides for an increase to nursing facility and HIV nursing facility per diem reimbursement rates of ten dollars and zero cents (\$10.00) and an increase to the Value Based Purchasing per diem adjustments of eighty-seven cents (\$0.87) for qualifying facilities, effective for dates of service beginning July 1, 2023. These per diem adjustments correspond to the state fiscal year (SFY) 2024 appropriation for nursing facilities and was contingent upon approval by the Centers for Medicare & Medicaid Services (CMS).

(11) Prospective Rate Determination. The division will use the rate setting cost report described in (11)(I) to determine the nursing facility's prospective rate, as detailed in (11)(A)-(I) below.

(F) Special Per Diem Adjustments. Special per diem rate adjustments may be added to a qualifying facility's rate without regard to the cost component ceiling if specifically provided as described below.

1. Patient care incentive. Each facility with a prospective rate on or after July 1, 2022, shall receive a per diem adjustment

equal to four and seventy-fifth percent (4.75%) of the facility's patient care per diem determined in paragraph (11)(A)1. subject to a maximum of one hundred thirty percent (130%) of the patient care median when added to the patient care per diem as determined in paragraph (11)(A)1. This adjustment will not be subject to the cost component ceiling of one hundred twenty percent (120%) for the patient care median.

2. Multiple component incentive. Each facility with a prospective rate on or after July 1, 2022, and which meets the following criteria shall receive a per diem adjustment:

A. If the sum of the facility's patient care per diem and ancillary per diem, as determined in subsections (11)(A) and (11)(B), is greater than or equal to seventy percent (70%), rounded to four (4) decimal places (.6985 would not receive the adjustment) of the facility's total per diem, the adjustment is as follows:

Patient Care & Ancillary Percent of Total Rate	Incentive
< 70%	\$0.00
> or = 70% but < 75%	\$0.10
> or = 75% but < or = 80%	\$0.15
> 80%	\$0.20

B. A facility shall receive an additional incentive if it receives the adjustment in subparagraph (11)(F)2.A. and if the facility's Medicaid utilization percent is greater than eighty-five percent (85%), rounded to four (4) decimal places (.8485 would not receive the adjustment). The adjustment is as follows:

Medicaid Utilization Percent	Incentive
< 85%	\$0.00
> or = 85% but < 90%	\$0.10
> or = 90% but < 95%	\$0.15
> or = 95%	\$0.20

3. Value Based Purchasing (VBP) Incentive. Each facility with a prospective rate on or after July 1, 2022, and which meets the following criteria shall receive a per diem adjustment:

A. The facility shall receive a per diem adjustment for each Quality Measure (QM) Performance threshold that it meets, *up to a maximum per diem adjustment of seven dollars (\$7.00)*. The threshold for each QM is based on national cut-points used by CMS in its Five Star Rating System. Each threshold is the maximum QM value a facility can have in order to receive the per diem adjustment. These thresholds are listed in Table A3 of the *Five-Star Quality Rating System: Technical Users' Guide* dated January 2017. The thresholds listed in Table A3 have been rounded to the nearest tenth for purposes of determining the VBP Incentive. Table A3 of the *Five-Star Quality Rating System: Technical Users' Guide* dated January 2017 is incorporated by reference and made a part of this rule as published by CMS and available at <https://dss.mo.gov/mhd/providers/nursing-home-reimbursement-resources.htm>. This rule does not incorporate any subsequent amendments or additions.

(I) **SFY 2023 QM Performance Measure Table.** The facility's most current twelve- (12-) month rolling average QM value as of January 21, 2022, is used to determine the per diem adjustment(s) the facility qualified to receive for the rates effective July 1, 2022.

[(III)] The QM Performance Measure threshold,

rounded to the nearest tenth, and per diem adjustments are as follows:

QM Performance	Threshold	Per Diem Adjustment
Decline in Late-Loss ADLs	< or = 10.0%	\$1.00
Decline in Mobility on Unit	< or = 8.0%	\$1.00
High-Risk Residents w/ Pressure Ulcers	< or = 2.7%	\$1.00
Anti-Psychotic Medications	< or = 6.8%	\$1.00
Falls w/ Major Injury	< or = 1.3%	\$1.00
In-Dwelling Catheter	< or = 1.1%	\$1.00
Urinary Tract Infection	< or = 1.9%	\$1.00

[(III) Any revisions to the per diem adjustments shown in the above table will be included in 13 CSR 70-10.016, as set forth in (12)(A).]

(II) SFY 2024 QM Performance Measure Table. Effective for dates of service beginning July 1, 2023, the QM Performance Measure per diem adjustments are as follows:

QM Performance	Threshold	Per Diem Adjustment
Decline in Late-Loss ADLs	< or = 10.0%	\$1.87
Decline in Mobility on Unit	< or = 8.0%	\$1.87
High-Risk Residents w/ Pressure Ulcers	< or = 2.7%	\$1.87
Anti-Psychotic Medications	< or = 6.8%	\$1.87
Falls w/ Major Injury	< or = 1.3%	\$1.87
In-Dwelling Catheter	< or = 1.1%	\$1.87
Urinary Tract Infection	< or = 1.9%	\$1.87

B. A VBP percentage will also be applied to the per diem adjustment for each facility that qualifies for a VBP Incentive. The VBP percentage will be determined by the total QM score calculated from the Five-Star Rating System scores for each of the eight (8) long-stay QMs, as follows:

(I) The eight (8) long-stay QMs included in the total QM score to determine the VBP percentage include the following:

- (a) Decline in Late-Loss ADLs;
- (b) Decline in Mobility on Unit;
- (c) High-Risk Residents w/ Pressure Ulcers;
- (d) Anti-Psychotic Medications;
- (e) Falls w/ Major Injury;
- (f) In-Dwelling Catheter;
- (g) Urinary Tract Infection; and
- (h) Physical Restraints;

(II) The facility's most current twelve- (12-) month rolling average QM value as of January 21, 2022, is used to determine the facility's QM Score and VBP Percentage **for the rates effective July 1, 2022;**

(III) For each QM value, the corresponding number of QM points will be determined from Table A3 of the *Five-Star Quality Rating System: Technical Users' Guide* dated January 2017;

(IV) The QM points for all of the QMs will be summed to determine the facility's total QM Score; and

(V) The VBP percentage for each scoring range is listed in the following table.

QM Scoring Tier	Minimum Score	VBP Percentage
1	600	100%
2	520	75%
3	440	50%
4	360	25%
5	0	0%

4. Mental Illness Diagnosis Add-On. Each facility with a prospective rate on or after July 1, 2022, and which meets the following criteria shall receive a per diem adjustment:

A. If at least forty percent (40%) of a facility's Medicaid participants have the following mental illness diagnosis, the facility shall receive a per diem adjustment of five dollars (\$5.00):

- (I) Schizophrenia; **and**
- (II) Bi-polar; **and**

[(III) Any revision to the Mental Illness Diagnosis Add-On reflected above in subparagraph (11)(F)4.A. will be included in 13 CSR 70-10.016, as set forth in subsection (12)(A).]

(H) Semi-Annual and Annual Rate Updates. Each facility with a prospective rate on or after July 1, 2022, shall have its rate updated for the following items as described below:

1. Semi-Annual Acuity Adjustment for Patient Care Per Diem Rate. Each facility's patient care per diem rate will be adjusted semi-annually using a current Medicaid CMI. The patient care per diem rate will be adjusted effective for dates of service beginning January 1 and July 1 of each year. The Medicaid CMI will be updated based on the facility's average Medicaid CMI using the RUGS IV 48 group model classifications from the two (2) preceding quarterly calculations. The allowable patient care cost per day determined in paragraph (11)(A)1. shall be adjusted by the applicable Medicaid CMI and shall be the facility's patient care per diem to be included in the facility's total prospective per diem rate, effective each January 1 and July 1. The patient care and multiple component incentives will not be updated based on the adjusted patient care per diem. The facility's prospective rate shall continue to include the patient care and multiple component incentives initially determined for the prospective rate. The applicable Medicaid CMI are as follows:

A. Effective for dates of service beginning January 1 of each year, each facility's Medicaid CMI will be updated using the average of the preceding July 1 and October 1 quarterly Medicaid CMI calculations; and

B. Effective for dates of service beginning July 1 of each year, each facility's Medicaid CMI will be updated using the average of the preceding January 1 and April 1 quarterly Medicaid CMI calculations;

2. Semi-Annual Adjustment for VBP Incentive. Each facility's QM Performance data shall be re-evaluated semi-annually and the per diem add-on rate shall be adjusted accordingly. The VBP will be recalculated effective for dates of service beginning January 1 and July 1 of each year. The QM Performance data will be updated based on the most current data available as of November 15 for the January 1 rate adjustment and as of May 15 for the July 1 rate adjustment. A facility must meet the criteria set forth in paragraph (11)(F)3. each period and will lose any per diem adjustments for which

it does not continue to qualify;

3. Semi-Annual Adjustment for Mental Illness Diagnosis Add-On. Each facility's Mental Illness Diagnosis data shall be re-evaluated semi-annually and the per diem add-on rate shall be adjusted accordingly. The Mental Illness Diagnosis will be recalculated effective for dates of service beginning January 1 and July 1 of each year. The Mental Illness Diagnosis data will be updated based on the most current data available as of November 15 for the January 1 rate adjustment and as of May 15 for the July 1 rate adjustment. A facility must meet the criteria set forth in paragraph (11)(F)4. each period and will lose any per diem adjustments for which it does not continue to qualify;

4. Annual Capital Rate Update. Each facility's capital rate will be recalculated annually by updating the rental value portion of the capital rate. The capital rate will be recalculated at the beginning of each state fiscal year (SFY), effective for dates of service beginning July 1, as follows:

A. The total facility size will be updated each year for any increases or decreases in licensed beds and capital expenditures that qualify as bed equivalencies, as follows:

(I) For SFY 2024, effective for dates of service beginning July 1, 2023, the total facility size will be updated using information from the 2020 and 2021 cost reports; and

(II) For SFY 2025 forward, the total facility size will be updated using the information from the third [(3rd)] prior year cost report relative to the SFY (i.e., for SFY 2025, the facility size will be updated using 2022 cost report data[.]);

B. The weighted average age of the facility shall be updated each year. The age shall be calculated from the year coinciding with the latest cost report used to update the facility size above in subparagraph (11)(A)1.A. (i.e., the age for SFY 2024 shall be calculated from 2021, the age for SFY 2025 shall be calculated from 2022, etc.); and

C. The asset value shall be updated each SFY. The asset value shall be updated for the year coinciding with the latest cost report used to update the facility size above in subparagraph (11)(A)1.A. (i.e., for SFY 2024 the 2021 asset value shall be used, for SFY 2025 the 2022 asset value shall be used, etc.); and

5. A facility's prospective rate shall be increased or decreased based upon the semi-annual and annual rate adjustments but the rate shall not be decreased below the facility's June 30, 2022, prospective rate. *[A facility's June 30, 2022, prospective rate shall be adjusted for any global per diem adjustments granted to nursing facilities as set forth in subsection (12)(A). Semi-annual and annual rate adjustments shall not decrease a facility's prospective rate below the June 30, 2022, prospective rate that has been adjusted for any global per diem adjustments for the applicable effective date].*

(I) Rate Setting Cost Report.

1. A facility with a valid Medicaid participation agreement and a prospective rate in effect on June 30, 2022, shall have its prospective rate rebased on its 2019 cost report. If a facility does not have a 2019 cost report, the next available cost report year shall be used as the rate setting cost report.

2. A nursing facility never previously certified for participation in the MO HealthNet program that originally enters the MO HealthNet program after June 30, 2022, shall receive an interim rate, as defined in subsection (4)(JJ), effective on the initial date of MO HealthNet certification. A prospective rate shall be determined in accordance with this regulation from the audited facility fiscal year cost report which covers the second full twelve- (12-) month fiscal year following the facility's initial date of MO HealthNet certification. This prospective rate shall be retroactively effective to the first day

of the facility's second full twelve- (12-) month fiscal year and shall replace the interim rate for dates of service beginning on the first day of the facility's second full twelve- (12-) month fiscal year. The following items shall be updated annually and shall be used in determining the prospective rate:

A. Ceilings. *[The patient care, ancillary, and administration cost component ceilings shall be updated for any global per diem adjustments as set forth in subsection (12)(A). The effective date of the updated ceilings shall be the effective date of the global per diem adjustment.]* The ceiling used to determine the prospective rate shall be the ceiling in effect at the beginning of the rate setting period;

B. Asset Value. The asset value shall be updated annually as set forth in subsection (4)(E). The asset value for the year coinciding with the rate setting cost report year (i.e., the end of the cost report period) shall be used; and

C. Age of Beds and Bed Equivalencies. The age of beds shall be calculated by subtracting the year the beds were originally licensed from the year coinciding with the rate setting cost report year (i.e., the end of the cost report period). The age of bed equivalencies shall be calculated by subtracting the year the capital expenditures were made from the year coinciding with the rate setting cost report (i.e., the end of the rate setting cost report period).

3. A facility with a valid Medicaid participation agreement in effect after June 30, 2022, which either voluntarily or involuntarily terminates its participation in the Medicaid Program and which reenters the Medicaid Program within two (2) years, shall have its prospective rate established as the rate in effect on the day prior to the date of termination from participation in the program plus rate adjustments which may have been granted with effective dates subsequent to the termination date but prior to reentry into the program as described in subsection (12)(A). This prospective rate shall be effective for service dates on and after the effective date of the reentry following a voluntary or involuntary termination.

(12) Adjustments to the Reimbursement. Subject to the limitations prescribed elsewhere in this regulation, a facility's reimbursement rate may be adjusted as described in this section[. 13 CSR 70-10.016.] and 13 CSR 70-10.017.

(A) Global Per Diem Rate Adjustments. A facility with either an interim rate or a prospective rate may qualify for the global per diem rate adjustments as set forth [in 13 CSR 70-10.016 Global Per Diem Adjustments to Nursing Facility and HIV Nursing Facility Reimbursement Rates.] below:

[1.Global per diem rate adjustments, other than per diem adjustments for the VBP Incentive per diems or the Mental Illness Diagnosis Add-On per diem, shall be allocated, and added to, the patient care, ancillary, and administration cost component ceilings based on the ceiling in effect at the time the global per diem adjustment is granted, unless the adjustment is directly attributable to a specific cost component(s). If the adjustment is directly attributable to a specific cost component(s), it shall be added to the specified cost component ceiling.

2. The cost component ceilings will not be adjusted by global per diem adjustments made to the VBP Incentive per diems or the Mental Illness Diagnosis Add-On per diem.]

1. SFY 2024 Per Diem Rate Adjustment.

A. Effective for dates of service beginning July 1, 2023, facilities with either an interim rate or a prospective rate in effect on July 1, 2023, shall be granted an increase to their per diem rate of ten dollars and zero cents (\$10.00);

B. Effective for dates of service beginning July 1, 2023, and ending December 31, 2023, the rate to which

the SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) shall be added to the facility's July 1, 2023, rate after all rate setting procedures have been applied, including adjustments for the Semi-Annual and Annual Rate Updates set forth in subsection (11)(H) that are effective July 1, 2023, and after selecting the greater of the Preliminary Per Diem or the June 30, 2022, prospective rate (excluding NFRA), and adding the NFRA per diem, VBP incentive, and MI add-on effective July 1, 2023. The increased VBP per diem adjustments effective July 1, 2023, detailed above in part (11)(F)3.A.(II) and shown in the accompanying QM Performance Measure table shall be used in this calculation. The SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) is not added to the facility's June 30, 2022, prospective rate and is not allocated and added to the cost component ceilings in performing this calculation.

C. Subsequent Semi-Annual and Annual Rate Updates. Effective for dates of service beginning with the effective date of the rate change (i.e., January 1 or July 1) and ending on the day prior to the effective date of the next rate change (i.e., December 31 or June 30), the SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) will be added to the facility's rate after all rate setting procedures have been applied, including the Semi-Annual and Annual Rate Updates set forth in subsection (11)(H) that are effective on the date of the rate change, and after selecting the greater of the Preliminary Per Diem or the June 30, 2022, prospective rate (excluding NFRA), and adding the NFRA per diem, VBP Incentive, and MI add-on effective on the date of the rate change. The increased VBP per diem adjustments effective July 1, 2023, detailed above in part (11)(F)3.A.(II) and shown in the accompanying QM Performance Measure table shall be used in this calculation. The SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) is not added to the facility's June 30, 2022, prospective rate and is not allocated and added to the cost component ceilings in performing this calculation. The SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) shall only be included in the rate once for each effective date; it is not a cumulative adjustment from one effective date to the next.

D. New Nursing Facilities. For new nursing facilities never previously certified for participation in the MO HealthNet program that need to have their prospective rate determined as set forth in subsection (11)(I), the SFY 2024 per diem adjustment of ten dollars and zero cents (\$10.00) will be added to the facility's rate beginning July 1, 2023, in the same manner as detailed above in subparagraphs (12)(A)1.B and (12)(A)1.C.

AUTHORITY: sections 208.153, 208.159, 208.201, and 660.017, RSMo 2016. Emergency rule filed May 16, 2023, effective May 31, 2023, expired Nov. 26, 2023. Original rule filed May 16, 2023, effective Dec. 30, 2023. Emergency amendment filed Feb. 21, 2024, effective March 6, 2024, expires Sept. 1, 2024. Amended: Filed Feb. 21, 2024.

PUBLIC COST: This proposed amendment will cost state agencies or political subdivisions approximately \$93,096,729 annually.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment

with the Department of Social Services, Legal Services Division-Rulemaking, PO Box 1527, Jefferson City, MO 65102-1527, or by email to Rules.Comment@dss.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

**FISCAL NOTE
PUBLIC COST**

- I. Department Title:** Title 13 - Department of Social Services
Division Title: Division 70 - MO HealthNet Division
Chapter Title: Chapter 10 - Nursing Home Program

Rule Number and Name:	13 CSR 70-10.020 Prospective Reimbursement Plan for Nursing Facility and HIV Nursing Facility Services
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Social Services MO HealthNet Division	Estimated Cost = \$93,096,729
Non-State Government Owned Nursing Facilities (32)	No estimated cost of compliance.

III. WORKSHEET

Description	Nursing Facility Rate Increase	Hospice Nursing Home Room & Board	Total Impact
Total Annual Estimated Cost:			
Estimated Medicaid Days – SFY 2024	7,928,928	668,856	
Per Diem Increase	\$10.87	\$10.33	
Estimated Impact – SFY 2024	\$86,187,447	\$6,909,282	\$93,096,729

IV. ASSUMPTIONS

Impact to Department of Social Services, MO HealthNet Division: The above impact to DSS, MHD was calculated using the following assumptions:

Nursing Facilities and HIV Nursing Facilities:

This amendment provides for a \$10.00 per diem increase to all nursing facility and HIV nursing facility per diem reimbursement rates and a \$0.87 per diem increase in the Value Based Purchasing (VBP) incentives for qualifying facilities for a total per diem increase of \$10.87.

Hospice:

Hospice providers will be impacted by this amendment because reimbursement for hospice services provided in nursing facilities (i.e., Hospice Nursing Home Room and Board) is based on the nursing facility per diem rate. MHD conducted a fiscal analysis using 13 CSR 70-50.010

to estimate the impact to hospice. Please note this is an estimated analysis with the assumption of hospice appropriation authority.

Hospice Nursing Home Room and Board services are reimbursed 95% of the nursing facility per diem rate. The per diem increase to nursing facility rates of \$10.87 computes to a per diem increase to hospice reimbursement rates of \$10.33 ($\$10.87 \times 95\%$).

Estimated Paid Days:

Nursing Facility –

The estimated nursing facility days for SFY 2024 are based on the SFY 2023 days trended by approximately 1%.

Hospice –

The estimated hospice days for SFY 2024 are based on the hospice days provided in nursing facilities for the last two SFYs.

Home and Community Based Services (HCBS):

HCBS provided on a monthly basis are limited to a percentage of the average monthly nursing facility payment (referred to as the HCBS cost cap). The HCBS cost cap for a given SFY is based on the average monthly nursing facility payments for the 12 months ending in April of the previous SFY. Therefore, the per diem increase to nursing facility rates of \$10.87 effective for dates of service beginning July 1, 2023 will not impact the HCBS cost cap for SFY 2024 but may impact the HCBS cost cap for SFY 2025. For SFY 2025, the HCBS cost cap is estimated to increase by approximately 8% as a result of this amendment. This may increase the amount of services, and the payments, for MO HealthNet participants that are at the cap.

Impact to Non-State Government Owned Nursing Facilities (32): The amendment will have no cost of compliance for Medicaid enrolled non-state government owned nursing facilities because it will have a positive fiscal impact. This amendment provides for a per diem increase to nursing facility and HIV nursing facility per diem reimbursement rates of \$10.87 effective for dates of service beginning July 1, 2023.

TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 10 – Nursing Home Program

PROPOSED AMENDMENT

13 CSR 70-10.120 Reimbursement for Nurse Assistant Training. The division is amending sections (1)–(4).

PURPOSE: This amendment updates the maximum allowable reimbursement for nurse assistant training to one thousand five hundred dollars (\$1,500) per person and updates other outdated terms and references.

(1) Definitions.

(D) “Cost report” is the Financial and Statistical Report for Nursing Facilities, required attachments, and all worksheets supplied by the division for this purpose per 13 CSR 70-10.015, **effective January 1, 1995, through June 30, 2022, and 13 CSR 70-10.020, effective beginning July 1, 2022.** The cost report details the cost of rendering both covered and noncovered services for the fiscal reporting period in accordance with the procedures prescribed by the division, and on forms provided by and/or approved by the division.

(G) “Division,” unless otherwise specified, refers to the Department of Social Services, MO HealthNet Division that is charged with administration of *[Missouri’s Medical Assistance]* **MO HealthNet** (Medicaid) Program.

(H) “Facility fiscal year” is a facility’s twelve- (12-) month fiscal reporting period *[covering the same twelve- (12-) month period as its federal tax year]*.

(L) “Patient day” is the period of service rendered to a patient between the census-taking hour on two (2) consecutive days. Census shall be taken in all facilities at midnight each day and a census log maintained in each facility for documentation purposes. Patient day includes the allowable temporary leave-of-absence days per 13 CSR 70-10.015(5)(D), **effective January 1, 1995, through June 30, 2022, and 13 CSR 70-10.020(5)(C), effective beginning July 1, 2022,** and hospital leave days per 13 CSR 70-10.070. The day of discharge is not a patient day for reimbursement purposes unless it is also the day of admission.

(M) “Provider or facility” is a nursing facility with a valid Medicaid participation agreement with the Department of Social Services for the purpose of providing nursing facility services to Title XIX-eligible *[recipients]* **participants.**

(2) General Principles.

(A) Provisions of this reimbursement plan shall apply only to nursing facilities with valid provider agreements certified by the Department of Social Services, Missouri Medicaid Audit and Compliance (MMAC) for participation in the *[Missouri Medical Assistance]* **MO HealthNet** (Medicaid) Program.

(3) Reimbursement for Nurse Assistants Employed at the Time of Training. If a nurse assistant is employed at a nursing facility and then passes an approved nurse assistant training and competency evaluation program, the division will reimburse a facility if all the following criteria are met:

(C) The following reimbursement amounts will be prorated based on Medicaid utilization:

1. *[Three hundred sixty-five dollars (\$365)]* **One thousand five hundred dollars (\$1,500)** for a nurse assistant completing the entire basic course (all lesson plans, seventy-five (75) hours classroom training, and one hundred (100) hours on-the-job training) and passing the final exam~~;~~, **as follows:**

Classroom Training	\$600
On-the-Job Training	\$575
Textbook and Supplies	\$200
Written Test	\$30
Skills Test	\$95
Total Allowable to be Prorated on Medicaid Utilization	\$1,500

2. A percentage of the *[three hundred sixty-five dollars (\$365)]* **one thousand five hundred dollars (\$1,500)** for nurse assistants who only complete a portion of the lesson plans and pass the final exam will be paid. The percentage will be based on how many lesson plans were completed. For example: If no on-the-job training was provided, and if only lesson plans 1, 2, 4, 5, 6, 8, 9, 10, 11, 12, 41, 42, and 43 were completed, the percentage of the *[\$365]* **\$1,500** allowable would be~~;~~–

*[\$ 34.50 classroom training
 ((18.36/hr × 75 hrs)/10) = \$138
 \$138 × 18.75 hours/75 hrs = \$34.50
 \$ 0.00 on-the-job training (0 of 100 hours)
 \$ 30.00 textbook and supplies
 \$ 50.00 testing fee
 \$ 25.00 certification fee
 \$139.50 allowable to be prorated on Medicaid utilization]*

Classroom Training (\$600 x 18.75 hours/75 hours)	\$150
On-the-Job Training	\$0
Textbook and Supplies	\$200
Written Test	\$30
Skills Test	\$95
Total Allowable to be Prorated on Medicaid Utilization	\$475

3. *[Seventy-five dollars (\$75)]* **One hundred twenty-five dollars (\$125)** for nurse assistants who do not complete any lesson plans through a challenge and pass the final exam;

(4) Reimbursement for Nurse Assistants Not Yet Employed at the Time of Training. If a nurse assistant is not employed at a nursing facility and that individual pays for the nurse assistant training and competency evaluation program, the division will reimburse a facility if all the following criteria are met:

(F) The division will prorate costs based on Medicaid utilization as follows:

1. *[Three hundred sixty-five dollars (\$365)]* **One thousand five hundred dollars (\$1,500)** for a nurse assistant completing the entire basic course (all lesson plans, seventy-five (75) hours classroom training, and one hundred (100) hours on-the-job training) and passing the final exam;

2. A percentage of the *[three hundred sixty-five dollars (\$365)]* **one thousand five hundred dollars (\$1,500)** for nurse assistants who only complete a portion of the lesson plans and pass the final exam. The percentage will be based on how many lesson plans were completed. See paragraph (3)(C)2. of this regulation; and

3. *[Seventy-five dollars (\$75)]* **One hundred twenty-five dollars (\$125)** for nurse assistants who do not complete any lesson plans through a challenge process and pass the final exam; and

AUTHORITY: sections 208.153, 208.159, 208.201, and 660.017,

*RSMo 2016, and section 208.152, RSMo Supp. [2018] 2023. Original rule filed May 30, 1995, effective Dec. 30, 1995. For intervening history, please consult the **Code of State Regulations**. Emergency amendment filed Feb. 26, 2024, effective March 11, 2024, expired Sept. 6, 2024. Amended: Filed Feb. 26, 2024.*

PUBLIC COST: This proposed amendment will cost state agencies or political subdivisions approximately \$2,383,124 annually.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Social Services, Legal Services Division-Rulemaking, PO Box 1527, Jefferson City, MO 65102-1527, or by email to Rules.Comment@dss.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

FISCAL NOTE
PUBLIC COST

- I. Department Title:** Title 13 - Department of Social Services
Division Title: Division 70 - MO HealthNet Division
Chapter Title: Chapter 10 - Nursing Home Program

Rule Number and Name:	13 CSR 70-10.120 Reimbursement for Nurse Assistant Training
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Social Services MO HealthNet Division	Estimated Annual Cost = \$2,383,124 million
Non-State Government Owned Nursing Facilities (32)	No estimated cost of compliance.

III. WORKSHEET**NAT Reimbursement Increase - Annual Impact**

Estimated Number of CNAs	3,180
Average Increase in NAT Reimbursement per CNA	\$749.41
Estimated Annual Impact	<u>\$2,383,124</u>

IV. ASSUMPTIONS

Impact to Department of Social Services, MO HealthNet Division: The above impact to DSS, MHD was calculated using the following assumptions:

Nursing Facilities and HIV Nursing Facilities:

This proposed amendment provides for an increase in the maximum allowable reimbursement to nursing facilities for nurse assistant training to one thousand five hundred dollars (\$1,500) per person. The additional reimbursement is for increases in costs associated with the training, textbooks, supplies, testing, and certification of Certified Nursing Assistants (CNAs).

Impact to Non-State Government Owned Nursing Facilities (32): The amendment will have no cost of compliance for Medicaid enrolled non-state government owned nursing facilities because it is expected to have a positive fiscal impact.

**TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 20 – Pharmacy Program**

PROPOSED AMENDMENT

13 CSR 70-20.320 Pharmacy Reimbursement Allowance.
The MO HealthNet Division is amending subsection (2)(E).

PURPOSE: This amendment updates the tax rates for the Pharmacy Reimbursement Allowance (PRA).

(2) Payment of the PRA.

(E) PRA Rates.

1. The PRA tax rate will be a uniform effective rate of one and twenty hundredths percent (1.20%) with an aggregate annual adjustment, by the MO HealthNet Division, not to exceed five hundredths percent (.05%) based on the pharmacy's total prescription volume.

2. Beginning January 1, 2019, the PRA tax rate will be a uniform effective rate of one and forty-three hundredths percent (1.43%) with an aggregate quarterly adjustment, by the MO HealthNet Division, not to exceed one and five-tenths percent (1.5%) based on the pharmacy's total prescription volume.

3. Beginning July 1, 2022, the PRA tax rate will be a uniform effective rate of thirty-seven hundredths percent (0.37%) with an aggregate quarterly adjustment, by the MO HealthNet Division, not to exceed one and five-tenths percent (1.5%) based on the pharmacy's total prescription volume.

4. Beginning July 1, 2023, the PRA tax rate will be a uniform effective rate of fifty-two hundredths percent (0.52%) with an aggregate quarterly adjustment, by the MO HealthNet Division, not to exceed one and five-tenths percent (1.5%) based on the pharmacy's total prescription volume.

5. Beginning January 1, 2024, the PRA tax rate will be a uniform effective rate of forty-nine hundredths percent (0.49%) with an aggregate quarterly adjustment, by the MO HealthNet Division, not to exceed one and five-tenths percent (1.5%) based on the pharmacy's total prescription volume.

[4.]6. The maximum rate shall be five percent (5%).

*AUTHORITY: sections 208.201, 338.505, and 660.017, RSMo 2016. Emergency rule filed June 20, 2002, effective July 1, 2002, expired Feb. 27, 2003. Original rule filed July 15, 2002, effective Feb. 28, 2003. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 21, 2024.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will cost private entities approximately \$14,597,854 in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Social Services, Legal Services Division-Rulemaking, PO Box 1527, Jefferson City, MO 65102-1527, or by email to Rules.Comment@dss.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE
PRIVATE COST**

- I. Department Title:** Title 13 - Department of Social Services
Division Title: Division 70 - MO HealthNet Division
Chapter Title: Chapter 20 – Pharmacy Program

Rule Number and Title:	13 CSR 70-20-320 Pharmacy Reimbursement Allowance (PRA)
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
3600	Enrolled MO HealthNet Pharmacy Providers	Estimated cost for: SFY 2024 - \$14,597,854

III. WORKSHEET

SFY 2023 Gross Sales	\$8,258,292,235
SFY 2024 Gross Sales	\$8,941,294,082
SFY 2023 Tax Rate	0.37%
SFY 2024 Tax Rate (July-December 2023)	0.52%
SFY 2024 Tax Rate (January - June 2024)	0.49%
SFY 2023 Tax Assessed	\$ 30,555,681
SFY 2024 Tax Estimated	\$ 45,153,535
Estimated Increase in Tax Assessment	\$ 14,597,854

IV. ASSUMPTIONS

N/A

**TITLE 19 – DEPARTMENT OF HEALTH AND
SENIOR SERVICES**

**Division 30 – Division of Regulation and Licensure
Chapter 1 – Controlled Substances**

PROPOSED AMENDMENT

19 CSR 30-1.064 Partial Filling of Controlled Substance Prescriptions. The Department of Health and Senior Services is amending the purpose statement and sections (1) and (2).

PURPOSE: This amendment updates Missouri’s partial filling of controlled substances prescriptions regulation to be consistent with federal law and recently promulgated federal regulations regarding the partial filling of controlled substances listed in Schedule II.

PURPOSE: This rule sets requirements for the partial filling of [Schedule II] controlled substance prescriptions.

(1) The partial filling of a controlled substance listed in Schedule II is permitted as provided in this rule and federal regulations.

[(1)](A) Insufficient supply on hand. The partial filling of a prescription for a controlled substance listed in Schedule II is permissible, if the pharmacist is unable to supply the full quantity called for in a written or emergency oral prescription, and s/he makes a notation of the quantity supplied on the face of the written prescription (or written record of the emergency oral prescription), or in the electronic record. The remaining portion of the prescription may be filled within seventy-two (72) hours of the first partial filling; however, if the remaining portion is not or cannot be filled within the seventy-two- (72-) hour period, the pharmacist shall so notify the prescribing individual practitioner. No further quantity may be supplied beyond seventy-two (72) hours without a new prescription.

(B) Long-term care or terminally ill patient. A prescription for a Schedule II controlled substance written for a patient in a long-term care facility (LTCF) or for a patient with a medical diagnosis documenting a terminal illness may be filled in partial quantities to include individual dosage units. If there is any question whether a patient may be classified as having a terminal illness, the pharmacist must contact the practitioner prior to partially filling the prescription. Both the pharmacist and the prescribing practitioner have a corresponding responsibility to assure that the controlled substance is for a terminally ill patient. The pharmacist must record on the prescription whether the patient is “terminally ill” or an “LTCF patient.” A prescription that is partially filled and does not contain the notation “terminally ill” or “LTCF patient” shall be deemed to have been filled in violation of Chapter 195, RSMo. For each partial filling, the dispensing pharmacist shall record on the back of the prescription (or on another appropriate record, uniformly maintained and readily retrievable) the date of the partial filling, quantity dispensed, remaining quantity authorized to be dispensed, and the identification of the dispensing pharmacist. The total quantity of Schedule II controlled substances dispensed in all partial fillings must not exceed the total quantity prescribed. Schedule II prescriptions for patients in a LTCF or patients with a medical diagnosis documenting a terminal illness shall be valid for a period not to exceed sixty (60) days from the issue date unless sooner terminated by the discontinuance of medication.

(C) Patient or prescriber request. For a patient who is not terminally ill or a patient in a long-term care facility, the partial filling of a prescription for a controlled substance listed in Schedule II may occur at the request of a patient or it may be directed by the prescriber in the manner established by applicable federal regulations. The dispensing of a partial filling under this subsection shall not occur beyond thirty (30) days from the date of the issuance of the prescription.

(2) The partial filling of a prescription for controlled substances listed in Schedules II, III, IV, or V is permissible, provided that –

(A) [Partial filling may occur at the request of a patient or it may be directed by the prescriber, unless the prescription is written for a patient in a long-term care facility (LTCF) or for a patient with a medical diagnosis documenting a terminal illness, in which case the pharmacist must record on the prescription whether the patient is “terminally ill” or “LTCF patient.”;]

[(B)] Each partial dispensing is recorded in the same manner as a refilling would be;

[(C)](B) With each partial dispensing, the pharmacy must document the date and quantity dispensed on the original prescription record or their electronic computer applications, provided that the electronic system meets all of the federal requirements for handling of electronic prescriptions for controlled substances, including the ability to retrieve the information pertaining to partially filled controlled substances;

[(D)](C) The total quantity dispensed in all partial fillings cannot exceed the total quantity prescribed;

[(E)](D) No dispensing occurs –

1. For controlled substances listed in Schedule II **written for a patient in a long term care facility (LTCF) or for a patient with a medical diagnosis documenting a terminal illness, [after] sixty (60) days after the date on which the original prescription was issued; [and]**

2. **For a partial filling of a prescription of a controlled substance listed in Schedule II at the request of a prescribing practitioner or patient, thirty (30) days after which the original prescription was issued;**

3. **For emergency oral prescriptions for controlled substances listed in Schedule II, seventy-two (72) hours after which the original emergency oral prescription was issued; and**

[2.]4. For controlled substances listed in Schedules III and IV, **[after] six (6) months after the date on which the original prescription was issued;**

[(F)](E) A partial dispensing is not considered a “refill” if the patient does not receive the full authorized amount at one time; and

[(G)](F) The prescription was written and filled in accordance with all other applicable laws and regulations.

AUTHORITY: section 195.080, RSMo Supp. [2020] 2023, and section 195.195, RSMo 2016. Original rule filed April 14, 2000, effective Nov. 30, 2000. For intervening history, please consult the Code of State Regulations. Amended: Filed Feb. 27, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support or in opposition to this proposed amendment with

E.J. Jackson, Missouri Department of Health and Senior Services, Bureau of Narcotics and Dangerous Drugs, PO Box 570, Jefferson City, MO 65102 or via email at BNDD@health.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.

TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES

Division 30 – Division of Regulation and Licensure Chapter 40 – Comprehensive Emergency Medical Services Systems Regulations

PROPOSED RULE

19 CSR 30-40.810 Ground Ambulance Transport of Patients to Locations That Are Not Hospitals

PURPOSE: This rule establishes training and transport requirements for ground ambulances to transport patients to Missouri Department of Mental Health designated Behavioral Health Crisis Centers and other locations for those patients who do not require transport to a hospital and whose health needs can be met by Behavioral Health Crisis Centers or these other locations where patients are transported.

(1) As used in this rule, the following terms and phrases shall mean –

(A) Advanced emergency medical technician (also known as Emergency Medical Technician-Intermediate) shall mean the mid-level of licensure of licensed emergency medical services personnel who meet the requirements of 19 CSR 30-40.342(5);

(B) Advanced life support shall mean an advanced level of care as provided to the adult and pediatric patient when a patient is in a more critical condition and a paramedic is required to assist in the treatment of the patient during transport by an ambulance;

(C) Basic life support shall mean a basic level of care, as provided to the adult and pediatric patient where only emergency medical technicians are on ambulances during transport;

(D) BHCC shall mean Behavioral Health Crisis Centers designated by the Missouri Department of Mental Health;

(E) Department shall mean the Missouri Department of Health and Senior Services;

(F) Emergency Medical Technician means the lowest level of licensure of licensed emergency medical services personnel who meet the requirements in 19 CSR 30-40.342(2);

(G) Ground ambulance services shall mean ambulance services licensed under 19 CSR 30-40.309;

(H) Hospital shall mean the definition of hospital in section 197.020, RSMo, or a hospital operated by the state of Missouri;

(I) Medical director shall mean the medical director of an ambulance service as required by 19 CSR 30-40.303; and

(J) Paramedic shall mean the highest level of licensure of licensed emergency medical services' personnel who meet the requirements in 19 CSR 30-40.342(4).

(2) Transport of patients to locations that are not hospitals, following a request for emergency care.

(A) Ground ambulance services may transport patients to locations that are not hospitals, such as BHCCs in Missouri, following a request for emergency care:

1. Ground ambulance services shall have written transportation protocols that allow ground ambulance services to transport to locations that are not hospitals, such as BHCCs in Missouri; or

2. Licensed emergency medical services personnel for ground ambulance services shall receive physician orders for approval to transport patients to locations that are not hospitals, such as BHCCs in Missouri;

3. Ground ambulance services shall transport patients to hospitals if patients require a level of care that only the hospitals can provide. This includes transporting behavioral health patients to hospitals who present with a likelihood of serious harm to themselves or others as the term "likelihood of serious harm" is defined under section 632.005, RSMo, or who present as significantly incapacitated by alcohol or drugs;

4. Ground ambulance services shall have a working relationship with the BHCCs and other providers of locations that they transport patients to that are not hospitals. Ground ambulance services shall understand the care that BHCCs and these other providers are able to give to patients, so patients are transported to an appropriate location in which the provider can provide the services that the patients require;

5. Ground ambulance services shall not transport patients to freestanding emergency departments unlicensed by the department, which are separate from the main hospital, when the patients require a hospital level of care, or when the patients do not require a hospital level of care and require a lesser level of care. Patients shall be transported to the emergency department located in the main hospital when the patients require a hospital level of care; and

6. Ground ambulance services shall transport trauma, stroke, and ST-elevation myocardial infarction (STEMI) patients to the appropriate department designated trauma, stroke, or STEMI centers as set forth in the ground ambulance services' department-approved community plan as allowed in 19 CSR 30-40.770 or in accordance with the department's transport protocols in 19 CSR 30-40.790 and 19 CSR 30-40.792.

(B) When providing services to patients transported to locations that are not hospitals following a request for emergency care, licensed emergency medical services personnel for ground ambulance services shall follow written medical protocols, physician orders to provide medical care, or orders from qualified health care professionals who have collaborative practice arrangements with physicians and are allowed under Missouri law and their collaborative practice arrangement to dispense or prescribe drugs and provide treatment. Paramedics for the ground ambulance services evaluating patients do not have to be on the ambulance crew that transports patients. Paramedics for the ground ambulance services can arrive on the scene to evaluate the patient and the patient may be transported to the location, which is not a hospital, with a basic life support ambulance staffed by emergency medical technicians and/or advanced emergency medical technicians if the patient does not require advanced life support care. Patients shall be transported by advanced life support ambulances or basic life support ambulances based on the patients' care needs.

(C) Licensed ground ambulance service personnel who evaluate and transport patients to facilities providing mental health services that are not hospitals, such as BHCCs in Missouri, shall be trained by the ground ambulance service or other providers on evaluating and caring for patients with mental health concerns. This training may include ground ambulance service personnel attending and completing the Missouri Crisis Intervention Team forty- (40-) hour course discussed in section 190.147, RSMo.

(D) Written transportation and medical protocols set forth in subsections (2)(A) and (2)(B) shall be approved by the medical director of the service.

(E) Ground ambulance services shall conduct training and activities with the services' personnel to ensure written transportation protocols and medical protocols set forth in subsections (2)(A) and (2)(B) are properly implemented and followed.

(F) Ground ambulance services shall evaluate the written transportation and medical protocols set forth in subsections (2)(A) and (2)(B) to ensure the protocols are being properly implemented and followed by the services' personnel during a review of these transports through the services' quality improvement program.

AUTHORITY: sections 190.109 and 190.185, RSMo 2016, and section 190.142, RSMo Supp. 2023. Original rule filed Feb. 26, 2024.

PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with George Miller at George.Miller@health.mo.gov or Missouri Department of Health and Senior Services, PO Box 570, Jefferson City, Missouri 65101-0570. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

TITLE 20 – DEPARTMENT OF COMMERCE AND INSURANCE

Division 2010 – Missouri State Board of Accountancy Chapter 4 – Continuing Education Requirements

PROPOSED AMENDMENT

20 CSR 2010-4.020 Qualifying Programs. The board is amending subsections (1)(B) and (1)(C).

PURPOSE: This amendment updates a publication date.

(1) Programs Qualifying for Continuing Professional Education (CPE) Credit.

(B) The *Statement on Standards for Continuing Professional Education (CPE) Programs*, revised [December 2019] **December 2023** and effective [December 31, 2019] **January 1, 2024**, published by the NASBA and AICPA are incorporated in this rule by reference. A copy of the *Statement on Standards for Continuing Professional Education (CPE) Programs* may be obtained online at www.nasbaregistry.org, or by contacting NASBA, 150 Fourth Avenue N., Suite 700, Nashville, TN[,] 37219 or AICPA, 1211 Avenue of the Americas, New York, NY 10036. This rule does not incorporate any later amendments or additions to the standards.

(C) Subject Areas. The board will accept programs meeting the standards set forth in the *Statement on Standards for Continuing Professional Education (CPE) Programs* [(December 31, 2019)] (**January 1, 2024**) and as set forth in this rule. The board will accept the following sources of CPE as defined in

the *Statement on Standards*:

1. Group programs;
2. Self-study programs;
3. Blended-learning programs;
4. Nano-learning programs;
5. Instructor/developer of CPE programs;
6. Technical reviewer of CPE programs or work on technical committees;
7. Independent study through a CPE program;
8. College or university courses in accounting or accounting-related field of study[,], except basic or introductory accounting courses or CPA exam preparation/review courses; and
9. Authorship of published articles, books, and other publications relevant to maintaining or improving professional competence. Authorship hours claimed for CPE shall not exceed two (2) hours in any calendar year.

*AUTHORITY: section 326.271, RSMo 2016, and section 326.277, RSMo Supp. [2021] 2023. This rule originally filed as 4 CSR 10-4.020. Original rule filed Nov. 5, 1984, effective Feb. 11, 1985. For intervening history, please consult the **Code of State Regulations**. Amended: Filed Feb. 22, 2024.*

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Board of Accountancy, PO Box 613, Jefferson City, MO 65102, by facsimile at (573) 751-0012, or via email at mosba@pr.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

This section will contain the final text of the rules proposed by agencies. The order of rulemaking is required to contain a citation to the legal authority upon which the order or rulemaking is based; reference to the date and page or pages where the notice of proposed rulemaking was published in the *Missouri Register*; an explanation of any change between the text of the rule as contained in the notice of proposed rulemaking and the text of the rule as finally adopted, together with the reason for any such change; and the full text of any section or subsection of the rule as adopted that has been changed from the text contained in the notice of proposed rulemaking. The effective date of the rule shall be not less than thirty (30) days after the date of publication of the revision to the *Code of State Regulations*.

The agency is also required to make a brief summary of the general nature and extent of comments submitted in support of or opposition to the proposed rule and a concise summary of the testimony presented at the hearing, if any, held in connection with the rulemaking, together with a concise summary of the agency's findings with respect to the merits of any such testimony or comments that are opposed in whole or in part to the proposed rule. The ninety-(90-) day period during which an agency shall file its order of rulemaking for publication in the *Missouri Register* begins either: 1) after the hearing on the proposed rulemaking is held; or 2) at the end of the time for submission of comments to the agency. During this period, the agency shall file with the secretary of state the order of rulemaking, either putting the proposed rule into effect, with or without further changes, or withdrawing the proposed rule.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 5 – Wildlife Code: Permits

ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-5.222 Youth Pricing: Deer and Turkey Permits
is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2024 (49 MoReg 83). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Conservation Commission received comments from one (1) individual on the proposed amendment.

COMMENT #1: The commission received comments from one (1) individual who expressed support for the proposed amendment, and who also expressed support for offering Deer Management Assistance Program permits to nonresident hunters at the resident price.

RESPONSE: The department does not offer nonresident deer

hunting permits at resident prices except for youth hunters. Because the price of nonresident deer hunting permits, except for youths, is higher than the price of resident deer hunting permits, we do not believe it is appropriate to reduce the price of nonresident Deer Management Assistance Program permits for adult hunters. The department does not believe there is adequate justification for reducing the price of nonresident Deer Management Assistance Program permits for adult hunters and doing so would create inconsistency with the pricing structure for other nonresident deer hunting permits. No changes have been made to the rule as a result of this comment.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 5 – Wildlife Code: Permits

ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-5.600 Resident Deer Management Assistance
Program Permit is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2024 (49 MoReg 83-84). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 5 – Wildlife Code: Permits

ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-5.605 Nonresident Deer Management Assistance
Program Permit is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2024 (49 MoReg 84). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission

**Chapter 7 – Wildlife Code: Hunting: Seasons,
Methods, Limits**

ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

3 CSR 10-7.433 Deer: Firearms Hunting Season is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2024 (49 MoReg 84). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 3 – DEPARTMENT OF CONSERVATION
Division 10 – Conservation Commission
Chapter 7 – Wildlife Code: Hunting: Seasons,
Methods, Limits**

ORDER OF RULEMAKING

By the authority vested in the Conservation Commission under sections 40 and 45 of Art. IV, Mo. Const., the commission amends a rule as follows:

**3 CSR 10-7.600 Deer Management Assistance Program
is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on January 16, 2024 (49 MoReg 84-85). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 10 – DEPARTMENT OF NATURAL RESOURCES
Division 10 – Air Conservation Commission
Chapter 6 – Air Quality Standards, Definitions,
Sampling and Reference Methods and Air Pollution
Control Regulations for the Entire State of Missouri**

ORDER OF RULEMAKING

By the authority vested in the Missouri Air Conservation Commission under section 643.050, RSMo Supp. 2023, the commission amends a rule as follows:

10 CSR 10-6.020 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on November 1, 2023 (48 MoReg 1921-1962). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Missouri Department of Natural Resources Air Pollution Control Program received two (2) comments from two (2) sources on this rule amendment: a representative for the Regulatory Environmental Group for Missouri (REGFORM) and a representative for Brundage Environmental and Ag Law LLC.

COMMENT #1: The representative for REGFORM expressed concerns over the deletion of the “Solids turnover ratio (RT)” definition from the rule text.

RESPONSE AND EXPLANATION OF CHANGE: This definition was originally part of the Surface Coating rule 10 CSR 10-5.330, which had applicable definitions placed back into the rule text in a previous rulemaking. Since this definition was part of the Surface Coating rule, it was marked for deletion along with the rest of the definitions applicable to that rule. However, this term only appears within the Surface Coating rule in the form of the abbreviation (R_T) rather than the entire term “Solids turnover ratio” and was subsequently overlooked during the process of moving applicable definitions back into the Surface Coating rule. As a result of this comment, the “Solids turnover ratio (R_T)” is revised to no longer be deleted and will be retained in 10 CSR 10-6.020 until it is added back into the Surface Coating rule. Changes were made to the proposed rule text as a result of this comment.

COMMENT #2: The representative for Brundage Environmental and Ag Law LLC pointed out an apparent typo in the definition for “Class IA concentrated animal feeding operations.” The definition in 10 CSR 10-6.020 lists the animal unit (AU) equivalent for ducks without a wet handling system as thirty (30). This does not match the same list in the Concentrated Animal Feeding Operations (CAFO) rule 10 CSR 20-6.300, which specifies three hundred (300) animal unit equivalent for ducks without a wet handling system.

RESPONSE: The definition for “Class IA concentrated animal feeding operations” in this rule is based on the list provided in the CAFO rule. Recent changes in the CAFO rule regarding class IA concentrated animal feeding operations required amendments to the definition in 10 CSR 10-6.020. However, the AU equivalent figure of three hundred (300) for ducks without a wet handling system listed in 10 CSR 20-6.300 is a typo. The listed animal count in the rule for ducks without a wet handling system to reach the seven thousand (7,000) animal count threshold is two hundred ten thousand (210,000). In order for two hundred ten thousand (210,000) ducks to be considered equivalent to seven thousand (7,000) animals, the AU equivalent for ducks must be thirty (30). The air program reached out to the department’s water protection program to confirm, and the water program confirmed the table did contain a typo and that thirty (30) is the correct AU equivalent value. As such, the value for the AU equivalent of thirty (30) for ducks without a wet handling system is the correct definition. No changes were made to the proposed rule text as a result of this comment.

10 CSR 10-6.020 Definitions and Common Reference Tables

(2) Definitions.

(S) All terms beginning with S.

1. Sealer – A finishing material used to seal the pores of a wood substrate before additional coats of finishing material are applied. Washcoats, which are used in some finishing systems to optimize aesthetics, are not sealers.

2. Secondary chamber – A component of the HMIWI that receives combustion gases from the primary chamber and in which the combustion process is completed.

3. Secondary emissions—The emissions which occur or would occur as a result of the construction or operation of an installation or major modification but do not come from the installation or major modification itself. Secondary emissions must be specific, well-defined, quantifiable, and impact the same general area as the installation or modification which causes the secondary emissions. Secondary emissions may include, but are not limited to—

A. Emissions from trucks, ships, or trains coming to or from the installation or modification; and

B. Emissions from any off-site support source which would not be constructed or increase its emissions except as a result of the construction or operation of the major stationary source or major modification.

4. Serial number—When referring to NO_x allowances, the unique identification number assigned to each NO_x allowance by the administrator or director.

5. Shutdown—Defined as follows:

A. For the purpose of 10 CSR 10-6.200, the period of time after all waste has been combusted in the primary chamber. For continuous HMIWI, shutdown shall commence no less than two (2) hours after the last charge to the incinerator. For intermittent HMIWI, shutdown shall commence no less than four (4) hours after the last charge to the incinerator. For batch HMIWI, shutdown shall commence no less than five (5) hours after the high-air phase of combustion has been completed; and

B. For all other purposes, the cessation of operation of any air pollution control equipment or process equipment, except the routine phasing out of process equipment.

6. Shutdown, permanent—Same as permanent shutdown.

7. Significant—A net emissions increase or potential to emit at a rate equal to or exceeding the *de minimis* levels or create an ambient air concentration at a level greater than those listed in 10 CSR 10-6.060(5)(E)3., or any emissions rate or any net emissions increase associated with an installation subject to 10 CSR 10-6.060 which would be constructed within ten kilometers (10 km) of a Class I area and have an air quality impact on the area equal to or greater than one microgram per cubic meter (1 µg/m³) (twenty-four- (24-) hour average). For purposes of new source review under 10 CSR 10-6.060 sections (7) and (8), net emission increases of hazardous air pollutants exceeding the *de minimis* levels are considered significant only if they are also criteria pollutants.

8. Six- (6-) minute period—A three hundred sixty- (360-) consecutive-second time interval. Six- (6-) minute block averages shall be utilized for continuous opacity monitoring system data per the provisions of Appendix B to 40 CFR 60, Performance Specification 1, promulgated as of July 1, 2007, and hereby incorporated by reference in this rule, as published by the U.S. Government Printing Office, 732 N Capitol Street NW, Washington, DC 20401. This rule does not incorporate any subsequent amendments or additions.

9. Sludge—Any solid, semisolid, or liquid waste generated from a municipal, commercial, or industrial wastewater treatment plant, water supply treatment plant, or air pollution control facility, exclusive of the treated effluent from a wastewater treatment plant.

10. Small HMIWI—An HMIWI whose maximum design waste burning capacity is less than or equal to two hundred (200) pounds per hour, or a continuous or intermittent HMIWI whose maximum charge rate is less than or equal to two hundred (200) pounds per hour, or a batch HMIWI whose maximum charge rate is less than or equal to one thousand six hundred (1,600) pounds per day. The following are not small HMIWI: a continuous or intermittent HMIWI whose maximum charge rate is more than two hundred (200) pounds per hour; a batch HMIWI whose maximum charge rate is more than one

thousand six hundred (1,600) pounds per day.

11. Small source—For the purpose of 10 CSR 10-6.110, an installation subject to 10 CSR 10-6.110 but not a point source as defined in 10 CSR 10-6.020 for the purpose of 10 CSR 10-6.110.

12. Smoke—Small gas-borne particles resulting from combustion, consisting of carbon, ash, and other material.

13. Solid fuel—A solid material used as a fuel that includes but is not limited to coal, wood, biomass, tires, plastics, and other nonfossil solid materials.

14. Solid waste—Any garbage, refuse, sludge from a wastewater treatment plant, water supply treatment plant, or air pollution control facility; and other discarded material, including solid, liquid, semisolid, or contained gaseous material resulting from industrial, commercial, mining, and agricultural operations, and from community activities but does not include solid or dissolved material in domestic sewage, or solid or dissolved materials in irrigation return flows or industrial discharges that are point sources subject to permits under 33 U.S.C. 1342, or source, special nuclear, or by-product material as defined by the Atomic Energy Act of 1954, as amended (42 U.S.C. 2014).

15. Solids—Same as coating solids.

16. Solids turnover ratio (R_T)—The ratio of total volume of coating solids that is added to the electrodeposition primer system in a calendar month divided by the total volume design capacity of the electrodeposition primer system.

17. Solvent—Organic materials which are liquid at standard conditions and which are used as dissolvers, viscosity reducers, or cleaning agents.

18. Solvent metal cleaning—The process of cleaning soils from metal surfaces by cold cleaning or open-top vapor degreasing or conveyorized degreasing.

19. Source—Any governmental, institutional, commercial, or industrial structure, installation, plant, building, or facility that emits or has the potential to emit any regulated air pollutant under the Clean Air Act (CAA). For purposes of section 502(c) of the CAA, a source, including a source with multiple units, shall be considered a single facility.

20. Source gas volume—The volume of gas arising from a process or other source operation.

21. Source operation—Use definition of emissions unit.

22. Springfield-Greene County area—The geographical area contained within Greene County.

23. St. Louis metropolitan area—The geographical area comprised of St. Louis, St. Charles, Jefferson, and Franklin counties and the City of St. Louis.

24. Stack—Any spatial point in an installation designed to emit air contaminants into ambient air. An accidental opening such as a crack, fissure, or hole is a source of fugitive emissions, not a stack.

25. Staff director—Director of the Air Pollution Control Program of the Department of Natural Resources.

26. Stain—Any color coat having a solids content by weight of no more than eight percent (8%) that is applied in single or multiple coats directly to the substrate. Includes but is not limited to nongrain raising stains, equalizer stains, sap stains, body stains, no-wipe stains, penetrating stains, and toners.

27. Standard conditions—A gas temperature of seventy degrees Fahrenheit (70 °F) and a gas pressure of 14.7 pounds per square inch absolute (psia).

28. Standard metropolitan statistical area (SMSA)—Any areas listed in Office of Management and Budget Bulletin No. 93-17 entitled “Revised Statistical Definitions for Metropolitan Areas” dated June 30, 1993, and hereby incorporated by reference in this rule, as published by the National Technical Information Services, 5285 Port Royal Road, Springfield, VA 22161. This rule does not incorporate any subsequent

amendments or additions.

29. Start-up – Defined as follows:

A. For the purpose of 10 CSR 10-6.200, the period of time between the activation of the system and the first charge to the unit. For batch HMIWI, start-up means the period of time between activation of the system and ignition of the waste; and

B. For all other purposes, the setting into operation of any air pollution control equipment or process equipment, except the routine phasing in of process equipment.

30. State – Any nonfederal permitting authority, including any local agency, interstate association, or statewide program. When clear from its context, state shall have its conventional territorial definition.

31. State implementation plan (SIP) – A series of plans adopted by the commission, submitted by the director, and approved by the administrator detailing methods and procedures to be used in attaining and maintaining the ambient air quality standards in Missouri.

32. State trading program NO_x budget – The total number of tons apportioned to all NO_x budget units in a given state, in accordance with the NO_x budget trading program, for use in a given control period.

33. Storage container – Vessel or tank, including mix equipment, used to hold finishing, cleaning, or washoff materials.

34. Storage tank – Any tank, reservoir, or vessel which is a container for liquids or gases, where no manufacturing process or part of it takes place.

35. Submit or serve – To send or transmit a document, information, or correspondence to the person specified in accordance with the applicable regulation –

A. In person;

B. By United States Postal Service; or

C. By other means of dispatch or transmission and delivery. Compliance with any submission, service, or mailing deadline shall be determined by the date of dispatch, transmission, or mailing and not the date of receipt.

36. Substrate – The surface onto which coatings are applied (or into which coatings are impregnated).

37. Synthesized pharmaceutical manufacturing – Manufacture of pharmaceutical products by chemical synthesis.

**TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 35 – Children’s Division
Chapter 35 – Alternative Care**

ORDER OF RULEMAKING

By the authority vested in the Department of Social Services, Children’s Division, under sections 207.020, 208.455, RSMo 2016, and 210.566.6, RSMo Supp. 2023, the division adopts a rule as follows:

13 CSR 35-35.070 Alternative Care Review Board is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2151-2152). No changes have been made to the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 35 – Children’s Division
Chapter 36 – Alternative Care Review Board**

ORDER OF RULEMAKING

By the authority vested in the Department of Social Services, Children’s Division, under sections 207.020, RSMo 2016, and 210.566.6, RSMo Supp. 2023, the division rescinds a rule as follows:

13 CSR 35-36.010 Alternative Care Review Board is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2152-2153). No changes have been made to the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 15 – Hospital Program**

ORDER OF RULEMAKING

By the authority vested in the Department of Social Services, MO HealthNet Division, under sections 208.153, 208.201, and 660.017, RSMo 2016, and section 208.152, RSMo Supp. 2023, the division amends a rule as follows:

13 CSR 70-15.010 Inpatient Hospital Services Reimbursement Methodology is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2153-2158). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 20 – Pharmacy Program**

ORDER OF RULEMAKING

By the authority vested in the Department of Social Services, MO HealthNet Division, under sections 208.153, 208.201, and 660.017, RSMo 2016, the division amends a rule as follows:

13 CSR 70-20.042 Automatic Refill Program is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 15, 2023 (48 MoReg 2296-2297). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 13 – DEPARTMENT OF SOCIAL SERVICES
Division 70 – MO HealthNet Division
Chapter 20 – Pharmacy Program

ORDER OF RULEMAKING

By the authority vested in the Department of Social Services, MO HealthNet Division, under sections 208.201 and 660.017, RSMo 2016, the division amends a rule as follows:

13 CSR 70-20.340 National Drug Code Requirement
is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2159-2160). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR SERVICES
Division 10 – Office of the Director
Chapter 3 – General and Family Physician Loan and Training Programs

ORDER OF RULEMAKING

By the authority vested in the Missouri Department of Health and Senior Services under section 191.430, RSMo Supp. 2023, the department adopts a rule as follows:

19 CSR 10-3.060 is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on November 15, 2023 (48 MoReg 2059-2064). Those sections with changes are reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received three (3) emails, including one (1) email with seven (7) comments from Sarah Willson, Vice President of Clinical and Regulatory Affairs, Missouri Hospital Association (MHA); one (1) email with a supportive comment from Jack Seigel, Outreach Manager, Missouri Nurses Association (MONA); and one (1) email with two (2) questions from Sarah Schappe, Director, Joint Committee on Administrative Rules (JCAR).

COMMENT #1: Sarah Willson with MHA stated that “it is imperative that we have incentives for physicians to stay and work in our state which includes loan forgiveness and repayment programs. While leaving the state is not a significant factor for other professionals, overall volume of those entering health care professions is. The expense of obtaining an education, especially a four-year degree, is a considerable factor and we believe the HPLRP will help.”

RESPONSE: No change has been made to the proposed rule.

COMMENT #2: Sarah Willson with MHA suggested that the Mental Health Professional definition be updated to clarify that social and human services recipients must be licensed as well as the mental health practitioners.

RESPONSE AND EXPLANATION OF CHANGE: It was the intent of the Mental Health Professional definition for “licensed” to cover both the mental health practitioners and the social and human services recipients; therefore, the Mental Health Professional definition language, subsection (1)(L), will be updated to add “licensed” before “social and human services” to clarify that a license is required for all professionals under this definition.

COMMENT #3: Sarah Willson with MHA pointed out that “Public Health Professional should have ‘associate degree’ removed to align with the ‘awards’ criteria specifying payment amounts.”

RESPONSE AND EXPLANATION OF CHANGE: This is an oversight and subsection (1)(N) defining Public Health Professional will be updated to replace ‘associate degree’ with “bachelor’s degree.”

COMMENT #4: Sarah Willson with MHA suggested that the department should also consider the workforce analysis reports generated by Professional Registration and may want to consider workforce reports generated from associations such as MHA when making prioritization decisions on which professions will be eligible for the repayment program.

RESPONSE: Per section 191.430, RSMo, “director of the department of health and senior services shall have the discretion to determine the health professionals and practitioners who will receive forgivable health professional loans from the department to pay their existing loans” and “upon consultation with the office of workforce development in the department of higher education and workforce development and the department of mental health, or their successor agencies.” The departments will utilize available data and resources to make an informed decision; however, no change has been made to the proposed rule as a result of this comment.

COMMENT #5: Sarah Willson with MHA suggested that the prioritization criteria for awards to mental health professionals should mirror that of the health care professional as most mental health services are provided by the private sector outside of state facilities or public health departments.

RESPONSE: While priority is given to mental health professionals working in a state facility or public health department, other mental health professionals are not excluded from receiving funding under this category. No change has been made to the proposed rule as a result of this comment.

COMMENT #6: Sarah Willson with MHA stated “MHA has long provided funding to the PRIMO program. It is our understanding with its dissolution, those funds are intended to go toward the State Loan Repayment Program. However, if there are remaining funds, they can be used to supplement the HPLRP. In the event funds are distributed to HPLRP, we do not believe these funds should be equally split among the three workforce categories. These funds should be used to support health care and mental health professionals agreeing to work in a hospital.”

RESPONSE AND EXPLANATION OF CHANGE: The rule was

written based on general revenue funding without expectation of donations or additional funding. The department welcomes donations to support this program and does not oppose the suggestion to utilize funding not allocated by general revenue as specified by the donor or grantor. Section (5) language updated to add the following statement: "Funding received through donation, gift, grant award, or any means other than general revenue will be utilized for awards as specified by the donor or grantor per appropriation authority."

COMMENT #7: Sarah Willson with MHA suggests that the service obligation should be three (3) years instead of two (2) years as written in the rule.

RESPONSE: While it would be beneficial to the state to lengthen the service obligation period, in order to remain competitive with the federal programs HPLRP will need to keep the service obligation at two (2) years. The federal loan repayment programs that require a three- (3-) year service commitment award seventy-five thousand to one hundred thousand (\$75,000-\$100,000), which is significantly higher than this program awards. No change has been made to the proposed rule as a result of this comment.

COMMENT #8: Jack Seigel, Outreach Manager, expressed that MONA is supportive of the proposed rule.

RESPONSE: No change has been made to the proposed rule.

COMMENT #9: Sarah Schappe, Director of JCAR, asked "Is the list of eligible professional and practitioner types referenced in (3)(C) a statement of general applicability, pursuant to section 536.010? If it is, and there is no exception in the statute, it would need to be promulgated as a rule or emergency rule."

RESPONSE AND EXPLANATION OF CHANGE: Subsection (3)(C) has been updated to include the list of eligible professional and practitioner types which will be updated through a rule amendment as needed in the future.

COMMENT #10: Sarah Schappe, Director of JCAR, stated that the links to the webpages in the rule do not work, specifically the "material that is incorporated by reference, for the Health Professional Loan Repayment Employment Verification Form in (9)."

RESPONSE: All links are active and working appropriately. No change has been made to the proposed rule.

19 CSR 10-3.060 Health Professional Loan Repayment Program

(1) Definitions. The following definitions shall be used in the interpretation and enforcement of this rule:

(L) Mental health professional means a licensed mental health practitioner or licensed social and human services provider who offers services for the purpose of improving an individual's mental health or to treat mental disorders and who has graduated with an associate degree or higher associated with a mental health or health care profession. This includes but is not limited to applied behavior analyst, licensed clinical social worker, licensed professional counselor, psychiatric advanced practice registered nurse, psychiatric assistant physician, psychiatric nurse, psychiatric physician assistant, psychiatric social worker, psychiatrist, or psychologist;

(N) Public health professional, for the purpose of this regulation, means professionals working to analyze, develop, and implement programs that protect the health of individuals, families, and communities with a bachelor's degree or higher. This includes but is not limited to epidemiologist, health educator, public health administrator, public health

laboratorian, public health program specialist, public health service coordinator, public health nurse, public school counselor, public school nurse, or social services professional;

(3) Eligibility. Annually, the director will determine the professional and practitioner types eligible to receive HPLRP loans from the department.

(C) Effective as of May 1, 2024, the eligible professional and practitioner types are as follows:

1. Health Care Professions –
 - A. Cardiologist;
 - B. Physical Therapist;
 - C. Occupational Therapist; and
 - D. Respiratory Therapist.
2. Mental Health Professions that treat substance use and opioid use disorders –
 - A. Licensed and provisional professional counselor;
 - B. Licensed behavior analyst;
 - C. Licensed assistant behavior analyst; and
 - D. Licensed and provisional licensed psychologist.
3. Public Health Professions –
 - A. Public Health Nurse.

(5) Selection Process. The department will allocate one-third (1/3) of the appropriated funding for each of the health professional categories: one-third (1/3) for health care loan repayment awards, one-third (1/3) for mental health loan repayment awards, and one-third (1/3) for public health loan repayment awards. In the event that allocated funding from any of the health professional categories is not awarded, the funds not awarded may be split equally between the other health professional categories, if they have unfunded qualifying applicants. Funding received through donation, gift, grant award, or any means other than general revenue will be utilized for awards as specified by the donor or grantor per appropriation authority. The department intends to fully allocate all funding in any given year provided that sufficient qualifying applications are received.

TITLE 20 – DEPARTMENT OF COMMERCE AND INSURANCE

Division 1140 – Division of Finance Chapter 2 – Banks and Trust Companies

ORDER OF RULEMAKING

By the authority vested in the Division of Finance under section 361.105, RSMo 2016, and sections 362.105 and 362.165, RSMo Supp. 2023, the division amends a rule as follows:

20 CSR 1140-2.070 Accounting for Other Real Estate is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on November 15, 2023 (48 MoReg 2065). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 20 – DEPARTMENT OF COMMERCE AND
INSURANCE****Division 1140 – Division of Finance
Chapter 2 – Banks and Trust Companies****ORDER OF RULEMAKING**

By the authority vested in the Division of Finance under sections 361.105, and 362.107, RSMo 2016, and section 362.105, RSMo Supp. 2023, the division rescinds a rule as follows:

20 CSR 1140-2.127 Branch Banking – ATMs is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on November 15, 2023 (48 MoReg 2065). No changes have been made to the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 20 – DEPARTMENT OF COMMERCE AND
INSURANCE****Division 1140 – Division of Finance
Chapter 6 – Interpretive Rulings****ORDER OF RULEMAKING**

By the authority vested in the Division of Finance under section 361.105, RSMo 2016, and section 362.105, RSMo Supp. 2023, the division amends a rule as follows:

20 CSR 1140-6.075 is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on November 15, 2023 (48 MoReg 2066-2067). Those sections with changes are reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: Two (2) staff comments were received during the public comment period that ended on December 15, 2023.

COMMENT # 1: A Division of Finance employee commented that the rule as originally filed did not mention whether regulated entities could establish out-of-state offices and would be subject to the same reporting requirements as those offices located in Missouri and wondered if it would be prudent to address these matters.

RESPONSE AND EXPLANATION OF CHANGE: The division decided that it was proper to address the above concerns, and the rule text has been amended to reflect the inclusion of these concepts.

COMMENT #2: With regard to the establishment of trust offices, a Division of Finance staff member suggested that “depository and non-depository” should be removed and banks “granted fiduciary powers pursuant to 362.115” be substituted in its place as it more accurately reflects the bank charters available in Missouri.

RESPONSE AND EXPLANATION OF CHANGE: The division believes that the comment is well founded, and the rule text

has been amended to reflect the inclusion of the suggested language.

**20 CSR 1140-6.075 Bank Offices – Definitions and Procedures
for Non-Branch Offices****(1) Definitions –**

(K) “Trust office” means an office of a bank or trust company chartered in Missouri, other than a main office or a branch, at which the bank or trust company engages in one (1) or more fiduciary activities requiring trust powers and/or activities incidental to the exercise of such trust powers, but at which deposits are not received, checks are not paid, nor money lent.

(2) Loan Production, Deposit Production, and Combination Offices. Any bank may establish one (1) or more in-state or out-of-state loan production, deposit production or non-branch banking facilities described in subparagraph (1)(C)2.F. of this rule that involve any combination of “loan-related functions” and “deposit-related functions” subject to the requirements of the host state, if any; and provided that, within thirty (30) days after establishing any such office, such bank shall file a written notice with the Division of Finance stating the name of the bank, the location of the office, and the activities to be conducted at the office. Notwithstanding anything contrary to the foregoing, if the purchase or lease of real property or improvements needed to establish any office authorized by this rule exceeds the legal loan limit or is from an officer, director, employee, affiliate, principal shareholder, or a related interest of such person, prior written approval shall be obtained from the commissioner of finance.

(3) Other Non-branch Banking Facilities. Any bank may establish one (1) or more in-state or out-of-state administrative offices or one (1) or more of the types of non-branch banking facilities described in subparagraph (1)(C)2.C. or (1)(C)2.E. of this rule, and such establishment does not require notice to the Division of Finance.

(4) Establishment of Trust Offices.

(A) A Missouri-chartered bank granted fiduciary powers pursuant to section 362.115, RSMo, and trust company, may establish one (1) or more in-state or out-of-state trust offices on the same conditions as set forth in section (2) subject to the requirements of the host state, if any.

(B) Banks and trust companies chartered by jurisdictions other than Missouri must comply with section 362.600, RSMo, to establish any trust office in this state.

(5) Remote Work. Nothing in this rule shall apply to the personal residences of bank officers, employees, or agents, who may be conducting bank business remotely at home, provided that bank customers are not permitted physical access to the residence for purposes of conducting business with the bank.

**TITLE 20 – DEPARTMENT OF COMMERCE AND
INSURANCE****Division 1140 – Division of Finance
Chapter 6 – Interpretive Rulings****ORDER OF RULEMAKING**

By the authority vested in the Division of Finance under section 361.105, RSMo 2016, and section 362.105, RSMo Supp. 2023, the division rescinds a rule as follows:

20 CSR 1140-6.085 Trust Representative Offices is rescinded.

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on November 15, 2023 (48 MoReg 2067). No changes have been made to the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 20 – DEPARTMENT OF COMMERCE AND
INSURANCE**

**Division 2263 – State Committee for Social Workers
Chapter 1 – General Rules**

ORDER OF RULEMAKING

By the authority vested in the State Committee for Social Workers under section 337.627, RSMo Supp. 2023, the committee amends a rule as follows:

20 CSR 2263-1.035 Fees is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 15, 2023 (48 MoReg 2297-2299). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-2.020 General Membership Provisions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2203-2204). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

**22 CSR 10-2.046 PPO 750 Plan Benefit Provisions and Covered
Charges is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2204). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

**22 CSR 10-2.047 PPO 1250 Plan Benefit Provisions and Covered
Charges is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2204-2205). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

**22 CSR 10-2.053 Health Savings Account Plan Benefit
Provisions and Covered Charges is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2205-2207). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-2.055 Medical Plan Benefit Provisions and Covered Charges **is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2208-2214). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-2.061 Plan Limitations **is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2215). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-2.070 Coordination of Benefits **is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2215-2216). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-2.075 Review and Appeals Procedure **is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2216-2218). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-2.089 Pharmacy Employer Group Waiver Plan for Medicare Primary Members **is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2218). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 2 – State Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-2.140 Strive for Wellness® Health Center Provisions, Charges, and Services **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2219). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE PLAN

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.020 General Membership Provisions **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2219). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE PLAN

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.055 Health Savings Account Plan Benefit Provisions and Covered Charges **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2220). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE PLAN

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.057 Medical Plan Benefit Provisions and Covered Charges **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2221-2227). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE PLAN

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.058 PPO 750 Plan Benefit Provisions and Covered Charges **is amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2228). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE PLAN

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.059 PPO 1250 Plan Benefit Provisions and Covered

Charges is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2228). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.061 Plan Limitations is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2228-2229). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.070 Coordination of Benefits is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2229-2230). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**TITLE 22 – MISSOURI CONSOLIDATED HEALTH CARE
PLAN**

**Division 10 – Health Care Plan
Chapter 3 – Public Entity Membership**

ORDER OF RULEMAKING

By the authority vested in the Missouri Consolidated Health Care Plan under section 103.059, RSMo 2016, the executive director amends a rule as follows:

22 CSR 10-3.075 Review and Appeals Procedure is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on December 1, 2023 (48 MoReg 2230-2231). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

This section may contain notice of hearings, correction notices, public information notices, rule action notices, statements of actual costs, and other items required to be published in the *Missouri Register* by law.

**TITLE 19 – DEPARTMENT OF HEALTH AND SENIOR
SERVICES**

**Division 60 – Missouri Health Facilities Review
Committee**

Chapter 50 – Certificate of Need Program

**NOTIFICATION OF REVIEW:
APPLICATION REVIEW SCHEDULE**

The Missouri Health Facilities Review Committee has initiated review of the CON applications listed below. A decision is tentatively scheduled for April 22, 2024. These applications are available for public inspection at the address shown below.

Date Filed

Project Number: Project Name
City (County)
Cost, Description

3/8/2024

#6093 HT: Mosaic Medical Center - Albany
Albany (Gentry County)
\$1,300,314, Replace MRI

3/11/2024

#6092 HT: Mercy Hospital Jefferson
Festus (Jefferson County)
\$2,722,520, Replace two cath labs

#6080 HT: Missouri Baptist Medical Center
St. Louis (St. Louis County)
\$1,335,206, Replace cath lab

#6087 HT: Barnes-Jewish St. Peters Hospital
St. Peters (St. Charles County)
\$2,430,000, Replace CT scanner

Any person wishing to request a public hearing for the purpose of commenting on these applications must submit a written request to this effect, which must be received by April 11, 2024. All written requests and comments should be sent to:

Chairman
Missouri Health Facilities Review Committee
c/o Certificate of Need Program
920 Wildwood Drive
PO Box 570
Jefferson City, MO 65102

For additional information, contact Alison Dorge at alison.dorge@health.mo.gov.

The Secretary of State is required by sections 347.141 and 359.481, RSMo, to publish dissolutions of limited liability companies and limited partnerships. The content requirements for the one-time publishing of these notices are prescribed by statute. This listing is published pursuant to these statutes. We request that documents submitted for publication in this section be submitted in camera ready 8 1/2" x 11" manuscript by email to adrules.dissolutions@sos.mo.gov.

**NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND
CLAIMANTS AGAINST KREHBIEL ENGINEERING, INC**

On February 15, 2024, Krehbiel Engineering, Inc., a Missouri Corporation, filed its Articles of Dissolution by Voluntary Action with the Missouri Secretary of State. The dissolution was effective on February 15, 2024. Claims against the Corporation must be submitted to:

Krehbiel Engineering, Inc
c/o Allen & Rector, PC Attorneys at Law
135 Harwood Avenue
PO Box 1700, Lebanon
Missouri 65536

Claims must include:

- 1) The name, address and telephone number of the claimant,
- 2) The amount and date of the claim, and
- 3) A brief description of the basis of the claim, including documentation.

NOTICE: All claims will be barred unless commenced within two years after the date of the publication of this notice.

**NOTICE OF DISSOLUTION TO ALL CREDITORS OF
AND CLAIMANTS AGAINST J – J BURNS, INC**

J – J Burns, Inc., a Missouri corporation, filed its Articles of Dissolution by Voluntary Action with the Missouri Secretary of State on February 1, 2024. The dissolution was effective on that date. Any and all claims against J – J Burns, Inc. may be sent to:

J. Brian Hill, Esq
2900 Brooktree Lane, Suite 100
Gladstone, Missouri 64119

Each claim should include the following information:

- 1) The name, address and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The basis for the claim;
- 4) The documentation supporting the claim; and
- 5) The date(s) on which the event(s) on which the claim is based occurred.

Any and all claims against J – J Burns, Inc. will be barred unless a proceeding to enforce such claim is commenced within two (2) years after the date this notice is published.

**NOTICE OF WINDING UP FOR LIMITED LIABILITY COMPANY
TO ALL CREDITORS OF AND CLAIMANTS AGAINST EYINK CONSULTING, LLC**

Eyink Consulting, LLC, a Missouri limited liability company, filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State on February 16, 2024. Any and all claims against Eyink Consulting, LLC may be sent to:

Affinity Law Group, LLC
1610 Des Peres Road, Suite 100
St. Louis, MO 63131

Each claim must include:

- 1) The name, address, and telephone number of the claimant;
- 2) Amount of the claim;
- 3) Basis for the claim; and
- 4) Documentation of the claim.

A claim against Eyink Consulting, LLC will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF WINDING UP FOR LIMITED LIABILITY COMPANY
TO ALL CREDITORS OF AND CLAIMANTS AGAINST FUNCTIONALITIES, LLC**

Functionalities, LLC, a Missouri limited liability company, filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State on February 16, 2024. Any and all claims against Functionalities, LLC may be sent to:

Affinity Law Group, LLC
1610 Des Peres Road, Suite 100
St. Louis, MO 63131

Each claim must include:

- 1) The name, address, and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The basis for the claim; and
- 4) The documentation of the claim.

A claim against Functionalities, LLC will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF DISSOLUTION TO ALL CREDITORS OF
AND CLAIMS AGAINST GLEN COVE PARTNERS, LLC**

On February 16, 2024, Glen Cove Partners, a Missouri limited liability company filed its Articles of Dissolution with the Missouri Secretary of State. You are hereby notified that if you believe you have a claim against Glen Cove Partners, LLC, you must submit a summary in writing of the circumstances surrounding your claim to:

Glen Cove Partners, LLC
C/o Frank J. Schmidt
1034 S. Brentwood Blvd, Ste 1555
St. Louis, MO 63117

The summary of your claim must include the following information:

- 1) The name, address, and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The date on which the event on which the claim is based occurred; and
- 4) A brief description of the nature of the debt or the basis for the claim.

All claims against Glen Cove Partners, LLC will be barred unless the proceeding to enforce the claim is commenced within 3 years after the publication of this Notice.

**NOTICE OF WINDING UP FOR LIMITED LIABILITY COMPANY TO ALL CREDITORS
AGAINST FIVE T ENTERPRISES, LLC**

On February 19, 2024, Five T Enterprises, LLC, a Missouri limited liability company, filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State, effective as of February 19, 2024. Said company requests that all persons and organizations who have claims against it present such claims immediately in writing to:

Schormann Law Firm, LLC
One Mid Rivers Mall Drive, Suite 256
St. Peters, Missouri 63376

All claims must include:

- 1) The name, address and telephone number of the claimant;
- 2) The amount claimed; the basis of the claim;
- 3) The date(s) on which the events occurred which provided the basis for the claim; and
- 4) Copies of any other supporting data.

Any claim against Five T Enterprises, LLC will be barred unless a proceeding to enforce the claim is commenced within three years after the publication of this notice.

**NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY TO ALL CREDITORS AND CLAIMANTS AGAINST
AMERICAN MIDWEST POLYMER LLC**

On February 20th, 2024, American Midwest Polymer LLC, a Missouri limited liability company (hereinafter the "Company"), filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State. Any claims against the Company may be sent to:

Bush & Patchett, L.L.C.,
Attn: Kerry Bush, 4240
Philips Farm Road, Suite 109,
Columbia, Missouri, 65201.

Each claim must include the following information:

- 1) The name, address and telephone number of the claimant;
- 2) The amount of claim;
- 3) The date on which the claim arose;
- 4) The basis for the claim; and
- 5) The documentation in support of the claim.

All claims against the Company will be barred unless the proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF DISSOLUTION OF CORPORATION TO ALL CREDITORS OF
AND CLAIMANTS AGAINST TARGET ALUMINUM, INC**

On January 29, 2024, Target Aluminum, Inc., a Missouri corporation (the "Corporation"), filed its Articles of Dissolution by Voluntary Action with the Missouri Secretary of State, effective as of December 6, 2023. All persons with claims against the Corporation are hereby notified that they may submit any claim in accordance with this notice to:

Carmody MacDonald P.C.
Attention: Brennan P. Connor
120 S. Central Avenue, Suite 1800
St. Louis, MO 63105

All claims must include:

- 1) The name, address, and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The basis for the claim;
- 4) Any documentation supporting the claim; and
- 5) The date(s) of the event(s) on which the claim is based occurred.

All claims against the Corporation will be barred unless a proceeding to enforce the claim is commenced within two (2) years after the publication of this notice.

**NOTICE OF DISSOLUTION OF CORPORATION TO ALL CREDITORS OF
AND CLAIMANTS AGAINST TARGET ALUMINUM OF ST. LOUIS, INC**

On January 29, 2024, Target Aluminum of St. Louis, Inc., a Missouri corporation (the "Corporation") filed its Articles of Dissolution by Voluntary Action with the Missouri Secretary of State, effective as of December 6, 2023. All persons with claims against the Corporation are hereby notified that they may submit any claim in accordance with this notice to:

Carmody MacDonald P.C.
Attention: Brennan P. Connor
120 S. Central Avenue, Suite 1800
St. Louis, MO 63105

All claims must include:

- 1) The name, address, and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The basis for the claim;
- 4) Any documentation supporting the claim; and
- 5) The date(s) of the event(s) on which the claim is based occurred.

All claims against the Corporation will be barred unless a proceeding to enforce the claim is commenced within two (2) years after the publication of this notice.

**NOTICE OF DISSOLUTION OF CORPORATION TO ALL CREDITORS OF
AND CLAIMANTS AGAINST DALCO INDUSTRIES, INC**

On January 26, 2024, Dalco Industries, Inc., a Missouri corporation (the "Corporation"), filed its Articles of Dissolution by Voluntary Action with the Missouri Secretary of State, effective as of December 6, 2023. All persons with claims against the Corporation are hereby notified that they may submit any claim in accordance with this notice to:

Carmody MacDonald P.C.
Attention: Brennan P. Connor
120 S. Central Avenue, Suite 1800
St. Louis, MO 63105

All claims must include:

- 1) The name, address, and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The basis for the claim;
- 4) Any documentation supporting the claim; and
- 5) The date(s) of the event(s) on which the claim is based occurred.

All claims against the Corporation will be barred unless a proceeding to enforce the claim is commenced within two (2) years after the publication of this notice.

**NOTICE OF CORPORATE DISSOLUTION TO ALL CREDITORS OF AND
CLAIMANTS AGAINST POGOLINO'S, INC**

On January 15, 2024, Pogolino's, Inc., a Missouri corporation, filed its Articles of Dissolution with the Missouri Secretary of State, effective on the filing date. All persons and organizations with claims against the corporation must submit a written summary of the claim to:

Pogolino's, Inc
c/o Scott M. McKinnis, Esq.
Hockensmith McKinnis Hamill, P.C.
12801 Flushing Meadows Dr., Ste. 101
Town & Country, MO 63131-1829

All claims must include:

- 1) Claimant's name, address and telephone number;
- 2) Claim amount;
- 3) Date(s) claim accrued (or will accrue);
- 4) Brief description of the nature of the debt or basis for the claim; and
- 5) If the claim is secured, and if so, the collateral used as security.

Because of the dissolution, any claims against Pogolino's, Inc. will be barred unless a proceeding to enforce the claim is commenced within two (2) years after the last publication of the two (one each statewide and county) notices authorized by statute.

**NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND CLAIMANTS AGAINST
PRIMETIME GROUP, LLC**

On February 26, 2024, Primetime Group, LLC, a Missouri limited liability company ("Company"), filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State, effective as of February 26, 2024. All person with claims against the Company are hereby notified that they may submit any claim in accordance with this notice to:

Company, c/o Steven C. Young
8930 Gravois Road
St. Louis, MO 63123

All claims must include:

- 1) The name, address and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The basis for the claim;
- 4) The date(s) on which the events on which the claim is based occurred; and
- 5) Any documentation in support of the claim.

All claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY
TO ALL CREDITORS AND CLAIMANTS AGAINST SUMMITS HOT YOGA, LLC**

On February 26th, 2024, Summits Hot Yoga, LLC, a Missouri limited liability company (hereinafter the "Company"), filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State. Any claims against the Company may be sent to:

Bush & Patchett, LLC
Attn: Kerry Bush
4240 Philips Farm Road, Suite 109
Columbia, Missouri, 65201

Each claim must include the following information:

- 1) The name, address and telephone number of the claimant;
- 2) The amount of claim;
- 3) The date on which the claim arose;
- 4) The basis for the claim; and
- 5) The documentation in support of the claim.

All claims against the Company will be barred unless the proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY
TO ALL CREDITORS OF AND CLAIMANTS AGAINST R-BAR RESTAURANTS, LLC**

On February 27, 2024, R-Bar Restaurants, LLC, a Missouri limited liability company ("Company"), filed its notice of Winding Up for Limited Liability Company with the Missouri Secretary of State, effective on the filing date. All persons and organizations must submit to:

Company, c/o Stacey Lynn Taylor
Independent Personal Representative
31291 Stonecrest Road
Warsaw, Missouri 65355

A written summary of any claims against Company, including:

- 1) Claimant's name, address, and telephone number;
- 2) Amount of claim;
- 3) Basis for the claim;
- 4) Documentation of the claim; and
- 5) If the claim is secured, and if so, the collateral used as security.

Because of the dissolution, any claims against Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND CLAIMANTS AGAINST
TRI-COLOR SUPPLY, LLC, A MISSOURI LIMITED LIABILITY COMPANY ("COMPANY")**

On February 28, 2024, Tri-Color Supply, LLC, Charter Number LC0965646, filed its notice of winding up with the Missouri Secretary of State. Said limited liability company requests that all persons and organizations who have claims against it present them immediately by letter to:

The Company
c/o Gayle Evans, Attorney at Law,
Chinnery Evans & Nail, P.C.,
800 NE Vanderbilt Lane,
Lee's Summit, Missouri 64064.

All claims must include the following information:

- 1) Name and current address of the claimant.
- 2) The amount claimed.
- 3) The clear and concise statement of the facts supporting the claim.
- 4) The date the claim was incurred.

Notice: Claims against Tri-Color Supply, LLC will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND CLAIMANTS
AGAINST GREYS HAULING AND EXCAVATION LLC**

Notice is here by given that Greys Hauling& Excavation LLC, a Missouri limited liability company on 02/01/2024 filed its notice of winding for a limited liability company with the Missouri Secretary of State. Greys Hauling & Excavation has not operated since September of 2022. Any Claims against the Company may be sent to:

Elizabeth Howald
15514 Northside Drive
New London,63459

Each Claim must include:

- 1) The name, address and telephone number of the claimant;
- 2) The amount of claim;
- 3) The date on which the claim arose;
- 4) The basis for the claim; and
- 5) The documentation in support of the claim.

All Claims against Greys Hauling & Excavation LLC will be barred unless the proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY TO ALL CREDITORS AND CLAIMANTS AGAINST
C&C MANAGEMENT OF ST. FRANCOIS COUNTY, LLC**

On February 27, 2024, C&C Management of St. Francois County, LLC, a Missouri limited liability company (hereinafter the "Company"), filed its Notice of Winding Up for a Limited Liability Company with the Missouri Secretary of State.

Any claims against the Company may be sent to:

Cynthia Cole
1515 East Malone Avenue
Sikeston, Missouri 63801

Each claim must include the following information:

- 1) The name, address and phone number of the claimant;
- 2) The amount claimed;
- 3) The date on which the claim arose;
- 4) The basis for the claim; and
- 5) The documentation in support of the claim.

All claims against the Company will be barred unless the proceeding to enforce the claim is commenced within three (3) years after the publication of this notice.

**NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND CLAIMANTS
AGAINST KUSH CONTRACTING LLC**

Notice is hereby given that Kush Contracting, a Missouri S-Corporation company on 02/01/2024 filed its notice of winding for a

S-Corporation with the Missouri Secretary of State. Any Claims against the Company may be sent to:

Elizabeth Howald
15514 Northside Drive
New London, MO 63459

Each Claim must include:

- 1) The name, address and telephone number of the claimant;
- 2) The amount of the claim;
- 3) The basis for the claim;
- 4) The date(s) on which the events on which the claim is based occurred; and
- 5) Any documentation in support of the claim.

All Claims against Kush Contracting LLC will be barred unless the proceeding to enforce the claim is commenced within two years after the publication of this notice.

**NOTICE OF WINDING UP TO ALL CREDITORS OF AND
CLAIMANTS AGAINST DEPENDABLE TITLE, LLC**

On February 28, 2024, Dependable Title, LLC, a Missouri limited liability company (the "Company"), filed a Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State. You are hereby notified that if you believe you have a claim against the Company you must submit the claim in writing to:

Dave Davis
13560 N. Barrett Parkway, Dr
St. Louis, MO 63131

The claim must include:

1. The name, address and telephone number of the claimant;
2. The amount of the claim;
3. The date on which the event occurred on which the claim is based; and
4. A brief description of the nature of or the basis for the claim;

All claims against the Company will be barred unless the proceeding to enforce the claim is commenced within three years after the publication of this notice.

**NOTICE OF WINDING UP FOR A LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND
CLAIMANTS AGAINST THE DIAMOND SHOPPE OF SPRINGFIELD, LLC**

On February 2, 2024, THE DIAMOND SHOPPE OF SPRINGFIELD, LLC, a Missouri limited liability company ("Company") filed its Notice of Winding Up for a Limited Liability Company with the Missouri Secretary of State. You are hereby notified that all parties that have claims against the Company must present them in writing to the Company:

Kevin H. Dunaway, Esq.
Attorney at Law
4905 S. National Avenue, Building B
Springfield, MO 65810

All claims must include:

- 1) The name, address, and telephone number of the claimant;
 - 2) The amount of the claim;
 - 3) The dates on which the claim is based occurred;
 - 4) A brief description of the nature of the debt or the basis for which the claim, and copies of any supporting documentation;
- and
- 5) If the claim is secured, identify the collateral used as security.

All claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after publication of this Notice.

**NOTICE OF WINDING UP FOR A LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND
CLAIMANTS AGAINST GREGORYS' TRADING CO., LLC**

On February 2, 2024, GREGORYS' TRADING CO., LLC, a Missouri limited liability company ("Company") filed its Notice of Winding Up for a Limited Liability Company with the Missouri Secretary of State. You are hereby notified that all parties that have claims against the Company must, present them in writing to the Company:

Kevin H. Dunaway, Esq.
Attorney at Law
4905 S. National Avenue, Building B
Springfield, MO 65810

All claims must include:

- 1) The name, address, and telephone number of the claimant;
 - 2) The amount of the claim;
 - 3) The dates on which the claim is based occurred;
 - 4) A brief description of the nature of the debt or the basis for which the claim, and copies of any supporting documentation;
- and
- 5) If the claim is secured, identify the collateral used as security.

All claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after publication of this Notice.

**NOTICE OF WINDING UP FOR A LIMITED LIABILITY COMPANY TO ALL CREDITORS OF AND
CLAIMANTS AGAINST JL INVESTMENT LEASING, LLC**

On February 1, 2024, JL INVESTMENT LEASING, LLC, a Missouri limited liability company ("Company") filed its Notice of Winding Up for a Limited Liability Company with the Missouri Secretary of State. You are hereby notified that all parties that have claims against the Company must present them in writing to the Company:

Kevin H. Dunaway, Esq.
Attorney at Law
4905 S. National Avenue, Building B
Springfield, MO 65810

All claims must include:

- 1) The name, address, and telephone number of the claimant;
 - 2) The amount of the claim;
 - 3) The dates on which the claim is based occurred;
 - 4) A brief description of the nature of the debt or the basis for which the claim, and copies of any supporting documentation;
- and
- 5) If the claim is secured, identify the collateral used as security.

All claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after publication of this Notice.

This cumulative table gives you the latest status of rules. It contains citations of rulemakings adopted or proposed after deadline for the monthly Update Service to the *Code of State Regulations*. Citations are to volume and page number in the *Missouri Register*, except for material in this issue. The first number in the table cite refers to the volume number or the publication year – 48 (2023) and 49 (2024). MoReg refers to *Missouri Register* and the numbers refer to a specific *Register* page, R indicates a rescission, W indicates a withdrawal, S indicates a statement of actual cost, T indicates an order terminating a rule, N.A. indicates not applicable, RAN indicates a rule action notice, RUC indicates a rule under consideration, and F indicates future effective date.

RULE NUMBER	AGENCY	EMERGENCY	PROPOSED	ORDER	IN ADDITION
1 CSR 10	OFFICE OF ADMINISTRATION				
1 CSR 10-3.010	State Officials' Salary Compensation Schedule Commissioner of Administration		48 MoReg 1757	49 MoReg 299	47 MoReg 1457
	DEPARTMENT OF AGRICULTURE				
2 CSR 30-1.020	Animal Health		49 MoReg 272		
2 CSR 30-10.010	Animal Health	49 MoReg 395	49 MoReg 397		
2 CSR 70-14.005	Plant Industries		48 MoReg 2268R		
2 CSR 70-14.010	Plant Industries		48 MoReg 2268R		
2 CSR 70-14.020	Plant Industries		48 MoReg 2268R		
2 CSR 70-14.030	Plant Industries		48 MoReg 2269R		
2 CSR 70-14.040	Plant Industries		48 MoReg 2269R		
2 CSR 70-14.060	Plant Industries		48 MoReg 2269R		
2 CSR 70-14.070	Plant Industries		48 MoReg 2269R		
2 CSR 70-14.080	Plant Industries		48 MoReg 2270R		
2 CSR 70-14.090	Plant Industries		48 MoReg 2270R		
2 CSR 70-14.100	Plant Industries		48 MoReg 2270R		
2 CSR 70-14.110	Plant Industries		48 MoReg 2271R		
2 CSR 70-14.120	Plant Industries		48 MoReg 2271R		
2 CSR 70-14.130	Plant Industries		48 MoReg 2271R		
2 CSR 70-14.140	Plant Industries		48 MoReg 2271R		
2 CSR 70-14.150	Plant Industries		48 MoReg 2272R		
2 CSR 70-14.160	Plant Industries		48 MoReg 2272R		
2 CSR 70-14.170	Plant Industries		48 MoReg 2272R		
2 CSR 70-14.180	Plant Industries		48 MoReg 2272R		
2 CSR 70-14.190	Plant Industries		48 MoReg 2273R		
2 CSR 70-17.010	Plant Industries		48 MoReg 2273R		
2 CSR 70-17.020	Plant Industries		48 MoReg 2273R		
2 CSR 70-17.030	Plant Industries		48 MoReg 2274R		
2 CSR 70-17.050	Plant Industries		48 MoReg 2274R		
2 CSR 70-17.070	Plant Industries		48 MoReg 2274R		
2 CSR 70-17.080	Plant Industries		48 MoReg 2274R		
2 CSR 70-17.100	Plant Industries		48 MoReg 2275R		
2 CSR 70-17.110	Plant Industries		48 MoReg 2275R		
2 CSR 70-17.120	Plant Industries		48 MoReg 2275R		
2 CSR 70-17.130	Plant Industries		48 MoReg 2275R		
2 CSR 80-5.010	State Milk Board		48 MoReg 2276		
2 CSR 100-14.010	Missouri Agricultural and Small Business Development Authority		49 MoReg 329		
2 CSR 110-4.010	Office of the Director	49 MoReg 263	49 MoReg 272		
2 CSR 110-4.020	Office of the Director	49 MoReg 263	49 MoReg 273		
2 CSR 110-4.040	Office of the Director	49 MoReg 264	49 MoReg 273		
2 CSR 110-4.050	Office of the Director	49 MoReg 265	49 MoReg 274		
	DEPARTMENT OF CONSERVATION				
3 CSR 10-4.113	Conservation Commission		This Issue		
3 CSR 10-4.117	Conservation Commission		This Issue		
3 CSR 10-5.205	Conservation Commission		This Issue		
3 CSR 10-5.215	Conservation Commission		This Issue		
3 CSR 10-5.222	Conservation Commission		49 MoReg 83	This Issue	
3 CSR 10-5.360	Conservation Commission		49 MoReg 138		
3 CSR 10-5.365	Conservation Commission		49 MoReg 140		
3 CSR 10-5.560	Conservation Commission		49 MoReg 140		
3 CSR 10-5.565	Conservation Commission		49 MoReg 142		
3 CSR 10-5.579	Conservation Commission		49 MoReg 142		
3 CSR 10-5.580	Conservation Commission		49 MoReg 142		
3 CSR 10-5.600	Conservation Commission		49 MoReg 83	This Issue	
3 CSR 10-5.605	Conservation Commission		49 MoReg 84	This Issue	
3 CSR 10-5.800	Conservation Commission		This Issue		
3 CSR 10-5.805	Conservation Commission		This Issue		
3 CSR 10-6.415	Conservation Commission		This Issue		
3 CSR 10-7.410	Conservation Commission		This Issue		
3 CSR 10-7.431	Conservation Commission		This Issue		
3 CSR 10-7.433	Conservation Commission		49 MoReg 84	This Issue	
3 CSR 10-7.600	Conservation Commission		49 MoReg 84	This Issue	
3 CSR 10-7.700	Conservation Commission		This Issue		
3 CSR 10-10.705	Conservation Commission		This Issue		
3 CSR 10-10.707	Conservation Commission		This Issue		
3 CSR 10-10.708	Conservation Commission		This Issue		
3 CSR 10-10.800	Conservation Commission		This Issue		
3 CSR 10-10.805	Conservation Commission		This Issue		
3 CSR 10-10.810	Conservation Commission		This Issue		
3 CSR 10-11.130	Conservation Commission		This Issue		
3 CSR 10-11.155	Conservation Commission		This Issue		
3 CSR 10-20.805	Conservation Commission		This Issue		

RULE NUMBER	AGENCY	EMERGENCY	PROPOSED	ORDER	IN ADDITION
DEPARTMENT OF ECONOMIC DEVELOPMENT					
4 CSR 85-5.010	Division of Business and Community Solutions		48 MoReg 1596	49 MoReg 169	
4 CSR 85-5.020	Division of Business and Community Solutions		48 MoReg 1599	49 MoReg 170	
4 CSR 85-5.030	Division of Business and Community Solutions		48 MoReg 1601	49 MoReg 172	
4 CSR 85-5.040	Division of Business and Community Solutions		48 MoReg 1602	49 MoReg 172	
4 CSR 85-5.050	Division of Business and Community Solutions		48 MoReg 1602	49 MoReg 173	
4 CSR 85-5.060	Division of Business and Community Solutions		48 MoReg 1603	49 MoReg 173	
4 CSR 85-5.070	Division of Business and Community Solutions		48 MoReg 1603	49 MoReg 173	
4 CSR 85-5.080	Division of Business and Community Solutions		48 MoReg 1603	49 MoReg 174	
4 CSR 85-5.090	Division of Business and Community Solutions		48 MoReg 1604	49 MoReg 174	
4 CSR 85-5.100	Division of Business and Community Solutions		48 MoReg 1605	49 MoReg 175W	
4 CSR 85-5.110	Division of Business and Community Solutions		48 MoReg 1606	49 MoReg 175	
DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION					
5 CSR 20-100.110	Division of Learning Service		49 MoReg 85		
5 CSR 20-400.580	Division of Learning Services		49 MoReg 276		
5 CSR 20-500.120	Division of Learning Services		49 MoReg 336		
5 CSR 20-500.140	Division of Learning Services		49 MoReg 337		
5 CSR 20-500.150	Division of Learning Services		49 MoReg 337		
5 CSR 20-500.160	Division of Learning Services		49 MoReg 338		
5 CSR 20-500.260	Division of Learning Services		48 MoReg 1758	49 MoReg 299	
5 CSR 20-500.270	Division of Learning Services		48 MoReg 1760	49 MoReg 299	
5 CSR 20-500.280	Division of Learning Services		48 MoReg 1760	49 MoReg 299	
5 CSR 25-100.340	Office of Childhood	49 MoReg 81	49 MoReg 89		
DEPARTMENT OF HIGHER EDUCATION AND WORKFORCE DEVELOPMENT					
6 CSR 10-9.010	Commissioner of Higher Education		48 MoReg 2276		
MISSOURI DEPARTMENT OF TRANSPORTATION					
7 CSR 10-25.030	Missouri Highways and Transportation Commission		49 MoReg 89		
7 CSR 10-25.060	Missouri Highways and Transportation Commission		49 MoReg 90		
7 CSR 10-25.071	Missouri Highways and Transportation Commission		49 MoReg 90		
7 CSR 10-25.072	Missouri Highways and Transportation Commission		49 MoReg 91		
7 CSR 10-25.073	Missouri Highways and Transportation Commission		49 MoReg 91		
7 CSR 60-2.010	Highway Safety and Traffic Division		49 MoReg 276		
7 CSR 60-2.030	Highway Safety and Traffic Division		49 MoReg 278		
7 CSR 60-2.040	Highway Safety and Traffic Division		49 MoReg 279		
7 CSR 60-2.050	Highway Safety and Traffic Division		49 MoReg 279		
7 CSR 60-2.060	Highway Safety and Traffic Division		49 MoReg 280		
7 CSR 265-8.018	Motor Carrier and Railroad Safety		48 MoReg 1817	49 MoReg 403	
7 CSR 265-8.032	Motor Carrier and Railroad Safety		48 MoReg 1817	49 MoReg 403	
7 CSR 265-8.080	Motor Carrier and Railroad Safety		48 MoReg 1817	49 MoReg 403	
7 CSR 265-8.130	Motor Carrier and Railroad Safety		48 MoReg 1818	49 MoReg 403	
7 CSR 265-8.300	Motor Carrier and Railroad Safety		48 MoReg 1818	49 MoReg 404	
7 CSR 265-8.320	Motor Carrier and Railroad Safety		48 MoReg 1819	49 MoReg 404	
7 CSR 265-10.015	Motor Carrier and Railroad Safety		49 MoReg 91		
7 CSR 265-10.030	Motor Carrier and Railroad Safety		49 MoReg 92		
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8 CSR 30-2.020	Division of Labor Standards		49 MoReg 146		
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9 CSR 30-3.160	Certification Standards		49 MoReg 5R		
9 CSR 30-3.192	Certification Standards		48 MoReg 1820	49 MoReg 175	
9 CSR 30-4.046	Certification Standards		48 MoReg 2150		
9 CSR 40-4.001	Licensing Rules		48 MoReg 1823	49 MoReg 176	
9 CSR 40-6.001	Licensing Rules		48 MoReg 1824	49 MoReg 176	
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10 CSR 20-8.130	Clean Water Commission		48 MoReg 1828		
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10 CSR 80-9.050	Solid Waste Management				49 MoReg 304
10 CSR 140-6.010	Division of Energy		48 MoReg 1962R	49 MoReg 404R	
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11 CSR 30-1.010	Office of the Director		48 MoReg 201		
11 CSR 30-8.010	Office of the Director		48 MoReg 202R		
11 CSR 30-8.020	Office of the Director		48 MoReg 202R		
11 CSR 30-8.030	Office of the Director		48 MoReg 202R		
11 CSR 30-8.040	Office of the Director		48 MoReg 202R		
11 CSR 30-9.010	Office of the Director		48 MoReg 203R		
11 CSR 30-9.020	Office of the Director		48 MoReg 203R		
11 CSR 30-9.030	Office of the Director		48 MoReg 203R		
11 CSR 30-9.040	Office of the Director		48 MoReg 203R		
11 CSR 30-9.050	Office of the Director		48 MoReg 204R		
11 CSR 45-5.030	Missouri Gaming Commission		48 MoReg 1763	49 MoReg 300	
11 CSR 45-5.100	Missouri Gaming Commission		48 MoReg 1763	49 MoReg 300	
11 CSR 45-5.140	Missouri Gaming Commission		48 MoReg 1764	49 MoReg 300	
11 CSR 45-5.150	Missouri Gaming Commission		48 MoReg 1764	49 MoReg 300	
11 CSR 45-5.235	Missouri Gaming Commission		48 MoReg 1765	49 MoReg 300	
11 CSR 70-2.010	Division of Alcohol and Tobacco Control		49 MoReg 154		

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11 CSR 70-2.130	Division of Alcohol and Tobacco Control		49 MoReg 155		
11 CSR 70-2.140	Division of Alcohol and Tobacco Control		49 MoReg 156		
11 CSR 70-2.190	Division of Alcohol and Tobacco Control		49 MoReg 156		
11 CSR 90-2.010	Missouri 911 Service Board	48 MoReg 1535	48 MoReg 1536	48 MoReg 2300	
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12 CSR 10-2.016	Director of Revenue		48 MoReg 2284R		
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12 CSR 10-2.090	Director of Revenue		48 MoReg 2284		
12 CSR 10-2.130	Director of Revenue		48 MoReg 1706R	49 MoReg 301R	
12 CSR 10-2.165	Director of Revenue		49 MoReg 340		
12 CSR 10-2.190	Director of Revenue		49 MoReg 342		
12 CSR 10-2.226	Director of Revenue		48 MoReg 1707	49 MoReg 301	
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12 CSR 10-2.740	Director of Revenue		49 MoReg 345		
12 CSR 10-3.552	Director of Revenue <i>moved to 12 CSR 10-102.110</i>		48 MoReg 1707	49 MoReg 302	
12 CSR 10-4.015	Director of Revenue		48 MoReg 1606R	49 MoReg 176R	
12 CSR 10-4.100	Director of Revenue		48 MoReg 1606R	49 MoReg 176R	
12 CSR 10-4.170	Director of Revenue <i>moved to 12 CSR 10-103.170</i>		48 MoReg 1607	49 MoReg 178	
12 CSR 10-4.230	Director of Revenue		48 MoReg 1708R	49 MoReg 301R	
12 CSR 10-4.280	Director of Revenue		48 MoReg 1708R	49 MoReg 301R	
12 CSR 10-4.622	Director of Revenue		49 MoReg 398R		
12 CSR 10-7.190	Director of Revenue		48 MoReg 1607R	49 MoReg 177R	
12 CSR 10-7.240	Director of Revenue		48 MoReg 2285		
12 CSR 10-7.300	Director of Revenue		48 MoReg 1607R	49 MoReg 177R	
12 CSR 10-7.320	Director of Revenue		48 MoReg 1608	49 MoReg 177	
12 CSR 10-10.020	Director of Revenue		48 MoReg 1608	49 MoReg 177	
12 CSR 10-10.030	Director of Revenue		48 MoReg 1608R	49 MoReg 177R	
12 CSR 10-10.130	Director of Revenue		48 MoReg 2286		
12 CSR 10-10.135	Director of Revenue		49 MoReg 162R		
12 CSR 10-10.140	Director of Revenue		This Issue		
12 CSR 10-10.160	Director of Revenue		48 MoReg 1609R	49 MoReg 177R	
12 CSR 10-10.175	Director of Revenue		48 MoReg 1609R	49 MoReg 178R	
12 CSR 10-10.180	Director of Revenue		48 MoReg 1609R	49 MoReg 178R	
12 CSR 10-16.090	Director of Revenue		48 MoReg 1709	49 MoReg 301	
12 CSR 10-23.160	Director of Revenue <i>moved to 12 CSR 10-26.221</i>		49 MoReg 280		
12 CSR 10-23.420	Director of Revenue		48 MoReg 2287		
12 CSR 10-23.430	Director of Revenue		48 MoReg 2288		
12 CSR 10-23.465	Director of Revenue <i>moved to 12 CSR 10-26.021</i>		49 MoReg 281		
12 CSR 10-23.470	Director of Revenue		48 MoReg 2288		
12 CSR 10-23.475	Director of Revenue		49 MoReg 398		
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12 CSR 10-24.160	Director of Revenue		49 MoReg 281		
12 CSR 10-24.190	Director of Revenue		49 MoReg 282		
12 CSR 10-24.330	Director of Revenue		48 MoReg 1544	49 MoReg 101	
12 CSR 10-24.340	Director of Revenue		49 MoReg 353		
12 CSR 10-24.350	Director of Revenue		49 MoReg 283		
12 CSR 10-25.040	Director of Revenue		48 MoReg 2289R		
12 CSR 10-25.140	Director of Revenue		49 MoReg 399		
12 CSR 10-26.020	Director of Revenue		49 MoReg 283		
12 CSR 10-26.021	Director of Revenue <i>formerly 12 CSR 10-23.465</i>		49 MoReg 281		
12 CSR 10-26.080	Director of Revenue		48 MoReg 2289		
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12 CSR 10-26.231	Director of Revenue	49 MoReg 395	49 MoReg 400		
12 CSR 10-39.010	Director of Revenue		48 MoReg 1609R	49 MoReg 178R	
12 CSR 10-41.010	Director of Revenue	48 MoReg 2263	48 MoReg 2289		
12 CSR 10-41.040	Director of Revenue		49 MoReg 284R		
12 CSR 10-42.080	Director of Revenue		48 MoReg 2293		
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12 CSR 10-102.554	Director of Revenue		48 MoReg 2295R		
12 CSR 10-103.170	Director of Revenue <i>formerly 12 CSR 10-4.170</i>		48 MoReg 1607	49 MoReg 178	
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13 CSR 35-36.010	Children's Division		48 MoReg 2152R	This Issue R	
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13 CSR 35-60.030	Children's Division		48 MoReg 1832	49 MoReg 369	
13 CSR 35-60.040	Children's Division	48 MoReg 1673	49 MoReg 400R 49 MoReg 400		
13 CSR 35-60.050	Children's Division	48 MoReg 1674	49 MoReg 353R 49 MoReg 354		
13 CSR 35-71.020	Children's Division	48 MoReg 1675	49 MoReg 356R 49 MoReg 356		
13 CSR 35-71.045	Children's Division	48 MoReg 1676			
13 CSR 35-71.070	Children's Division	48 MoReg 1677			
13 CSR 70-3.230	MO HealthNet Division		48 MoReg 2295		
13 CSR 70-10.020	MO HealthNet Division	This Issue	This Issue		
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13 CSR 70-20.042	MO HealthNet Division		48 MoReg 2296	This Issue	
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15 CSR 30-3.020	Secretary of State		49 MoReg 5		
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16 CSR 50-20.120	The County Employees' Retirement Fund		48 MoReg 1962	49 MoReg 369	
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17 CSR 10-2.020	Kansas City Board of Police Commissioners		48 MoReg 2168R 48 MoReg 2168	49 MoReg 405R 49 MoReg 405	
17 CSR 10-2.030	Kansas City Board of Police Commissioners		48 MoReg 2176R 48 MoReg 2176	49 MoReg 405R 49 MoReg 405	
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17 CSR 10-2.050	Kansas City Board of Police Commissioners		48 MoReg 2192R 48 MoReg 2192	49 MoReg 406R 49 MoReg 406	
17 CSR 10-2.055	Kansas City Board of Police Commissioners		48 MoReg 2198R 48 MoReg 2198	49 MoReg 407R 49 MoReg 408	
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19 CSR 10-60.060	Office of the Director	48 MoReg 1901 48 MoReg 1906T			
19 CSR 30-1.002	Division of Regulation and Licensure	48 MoReg 1906	48 MoReg 1963	49 MoReg 302	
19 CSR 30-1.064	Division of Regulation and Licensure		This Issue		
19 CSR 30-20.011	Division of Regulation and Licensure		48 MoReg 1785	49 MoReg 303	
19 CSR 30-20.013	Division of Regulation and Licensure		48 MoReg 1785	49 MoReg 303	
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20 CSR	Construction Claims Binding Arbitration Cap				49 MoReg 304
20 CSR	Non-Economic Damages in Medical Malpractice Cap				49 MoReg 305
20 CSR	Sovereign Immunity Limits				49 MoReg 45
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20 CSR 400-5.900	Life, Annuities and Health		49 MoReg 285		
20 CSR 400-13.100	Life, Annuities and Health		49 MoReg 295		
20 CSR 1140-2.070	Division of Finance		48 MoReg 2065	This Issue	
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20 CSR 1140-6.075	Division of Finance		48 MoReg 2066	This Issue	
20 CSR 1140-6.085	Division of Finance		48 MoReg 2067R	This Issue R	
20 CSR 2010-4.020	Missouri State Board of Accountancy		This Issue		
20 CSR 2030-14.020	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects		48 MoReg 1832	49 MoReg 179	
20 CSR 2030-14.030	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects		48 MoReg 1833	49 MoReg 179	
20 CSR 2030-14.040	Missouri Board for Architects, Professional Engineers, Professional Land Surveyors, and Professional Landscape Architects		48 MoReg 1834	49 MoReg 179	
20 CSR 2095-2.010	Committee of Professional Counselors		48 MoReg 2067	49 MoReg 369	
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20 CSR 2150-5.100	State Board of Registration for the Healing Arts		49 MoReg 360		
20 CSR 2150-6.060	State Board of Registration for the Healing Arts		48 MoReg 2203	49 MoReg 409	
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20 CSR 2200-3.060	State Board of Nursing		48 MoReg 2071	49 MoReg 370	
20 CSR 2200-4.010	State Board of Nursing		49 MoReg 26		
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20 CSR 2200-4.200	State Board of Nursing		49 MoReg 363		
20 CSR 2200-6.030	State Board of Nursing	49 MoReg 268	49 MoReg 296		
20 CSR 2220-2.410	State Board of Pharmacy	48 MoReg 2058T			
20 CSR 2220-2.900	State Board of Pharmacy		48 MoReg 1834	49 MoReg 180	
20 CSR 2220-2.910	State Board of Pharmacy		48 MoReg 1841	49 MoReg 180	
20 CSR 2231-2.010	State Board of Pharmacy	49 MoReg 133	49 MoReg 165		
20 CSR 2250-5.020	Missouri Real Estate Commission		49 MoReg 92		
20 CSR 2263-1.035	State Committee for Social Workers		48 MoReg 2297	This Issue	
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20 CSR 2270-2.031	Missouri Veterinary Medical Board		49 MoReg 366		
20 CSR 2270-2.041	Missouri Veterinary Medical Board		49 MoReg 367		
20 CSR 2270-3.020	Missouri Veterinary Medical Board		49 MoReg 367		
20 CSR 2270-4.041	Missouri Veterinary Medical Board		49 MoReg 367		
20 CSR 4240-40.030	Public Service Commission		48 MoReg 1619	49 MoReg 180	
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22 CSR 10-2.020	Health Care Plan	48 MoReg 2115	48 MoReg 2203	This Issue	
22 CSR 10-2.046	Health Care Plan	48 MoReg 2116	48 MoReg 2204	This Issue	
22 CSR 10-2.047	Health Care Plan	48 MoReg 2116	48 MoReg 2204	This Issue	
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22 CSR 10-3.057	Health Care Plan	48 MoReg 2135	48 MoReg 2221	This Issue	
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2 CSR 30-10.010	Inspection of Meat and Poultry.....	49 MoReg 395	Feb. 29, 2024. Aug. 26, 2024
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2 CSR 110-4.010	Who Shall Register	49 MoReg 263	Jan. 24, 2024. July 21, 2024
2 CSR 110-4.020	Interest Defined	49 MoReg 263	Jan. 24, 2024. July 21, 2024
2 CSR 110-4.040	Procedure for Filing.....	49 MoReg 264	Jan. 24, 2024. July 21, 2024
2 CSR 110-4.050	Process for Approval	49 MoReg 265	Jan. 24, 2024. July 21, 2024
Department of Elementary and Secondary Education			
Office of Childhood			
5 CSR 25-100.340	Early Childhood Education Standards.....	49 MoReg 81.	Dec. 20, 2023. June 16, 2024
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12 CSR 10-26.231	Maximum Dealer Administrative Fees	49 MoReg 395	Feb. 23, 2024. Aug. 20, 2024
12 CSR 10-41.010	Annual Adjusted Rate of Interest	48 MoReg 2263	Jan. 1, 2024. June 28, 2024
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MO HealthNet Division			
13 CSR 70-10.020	Prospective Reimbursement Plan for Nursing Facility and HIV Nursing Facility Services	This Issue	March 6, 2024. Sept. 1, 2024
13 CSR 70-10.120	Reimbursement for Nurse Assistant Training.....	This Issue	March 11, 2024. Sept. 6, 2024
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19 CSR 10-3.050	Graduate Medical Education Grant Program.....	48 MoReg 1747.	Sept. 18, 2023. March 15, 2024
19 CSR 10-3.060	Health Professional Loan Repayment Program.....	48 MoReg 2053	Oct. 27, 2023. April 23, 2024
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19 CSR 30-1.002	Schedules of Controlled Substances	48 MoReg 1906	Oct. 10, 2023. April 6, 2024
19 CSR 30-40.810	Ground Ambulance Transport of Patients to Locations That Are Not Hospitals	This Issue	March 11, 2024. Sept. 6, 2024
Department of Commerce and Insurance			
State Board of Nursing			
20 CSR 2200-6.030	Intravenous Infusion Treatment Administration by Qualified Practical Nurses; Supervision by a Registered Professional Nurse	49 MoReg 268	Jan. 22, 2024. July 19, 2024
Division of Professional Registration			
20 CSR 2231-2.010	Designation of License Renewal Dates and Related Application and Renewal Information	49 MoReg 133.	Feb. 15, 2024. Aug. 12, 2024
Missouri Consolidated Health Care Plan			
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22 CSR 10-2.020	General Membership Provisions	48 MoReg 2115.	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.046	PPO 750 Plan Benefit Provisions and Covered Charges ..	48 MoReg 2116.	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.047	PPO 1250 Plan Benefit Provisions and Covered Charges.	48 MoReg 2116.	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.053	Health Savings Account Plan Benefit Provisions and Covered Charges	48 MoReg 2117.	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.055	Medical Plan Benefit Provisions and Covered Charges ..	48 MoReg 2121.	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.061	Plan Limitations.....	48 MoReg 2128	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.070	Coordination of Benefits.....	48 MoReg 2129	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.075	Review and Appeals Procedure.....	48 MoReg 2129	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.089	Pharmacy Employer Group Waiver Plan for Medicare Primary Members	48 MoReg 2132.	Jan. 1, 2024. June 28, 2024
22 CSR 10-2.140	Strive for Wellness® Health Center Provisions, Charges, and Services	48 MoReg 2133.	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.020	General Membership Provisions	48 MoReg 2133.	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.055	Health Savings Account Plan Benefit Provisions and Covered Charges	48 MoReg 2134.	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.057	Medical Plan Benefit Provisions and Covered Charges ..	48 MoReg 2135	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.058	PPO 750 Plan Benefit Provisions and Covered Charges ..	48 MoReg 2143.	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.059	PPO 1250 Plan Benefit Provisions and Covered Charges.	48 MoReg 2143.	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.061	Plan Limitations.....	48 MoReg 2144.	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.070	Coordination of Benefits.....	48 MoReg 2145	Jan. 1, 2024. June 28, 2024
22 CSR 10-3.075	Review and Appeals Procedure.....	48 MoReg 2146	Jan. 1, 2024. June 28, 2024

The Secretary of State shall publish all executive orders beginning January 1, 2003, pursuant to section 536.035.2, RSMo.

ORDER	SUBJECT MATTER	FILED DATE	PUBLICATION
2024			
24-04	Designates members of his staff to have supervisory authority over departments, divisions and agencies of state government	February 29, 2024	This Issue
24-03	Declares a State of Emergency and declares Missouri will implement the Emergency Mutual Aid Compact (EMAC) agreement with the State of Texas to provide support with border operations	February 20, 2024	This Issue
24-02	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to forecasted winter storm systems	January 11, 2024	49 MoReg 270
24-01	Orders the Dept. of Agriculture to establish rules regarding acquisitions of agricultural land by foreign businesses	January 2, 2024	49 MoReg 136
2023			
23-10	Extends Executive Order 23-05 to address drought-response efforts until May 1, 2024	November 17, 2023	48 MoReg 2267
23-09	Orders state offices to be closed on Friday, November 24, 2023	November 9, 2023	48 MoReg 2149
23-08	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to forecasted severe storm systems	August 5, 2023	48 MoReg 1684
23-07	Designates members of his staff to have supervisory authority over departments, divisions and agencies of state government	July 28, 2023	48 MoReg 1595
23-06	Rescinds Executive Order 17-20	June 29, 2023	48 MoReg 1423
23-05	Declares drought alerts for 60 Missouri counties in accordance with the Missouri Drought Mitigation and Response Plan	May 31, 2023	48 MoReg 1179
23-04	Designates members of the governor's staff as having supervisory authority over each department, division, or agency of state government	April 14, 2023	48 MoReg 911
23-03	Declares a State of Emergency and directs the Missouri State Emergency Operations Plan be activated due to severe storm systems	March 31, 2023	48 MoReg 795
23-02	Extends Executive Order 22-08, the State of Emergency, and waivers until February 28, 2023	January 24, 2023	48 MoReg 433
23-01	Orders the commencement of the Missourians Aging with Dignity Initiative, with directives to support all citizens as they age	January 19, 2023	48 MoReg 431

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JOHN R. ASHCROFT



SECRETARY OF STATE

Administrative Rules Contact Information

General Inquiries

(573) 751-4015
rules@sos.mo.gov

Curtis W. Treat, Editor-in-Chief

(573) 751-2022
curtis.treat@sos.mo.gov

Stephanie Martin, Managing Editor

(573) 522-2196
stephanie.martin@sos.mo.gov

Jacqueline D. White, Publication Specialist II

(573) 526-1259
jacqueline.white@sos.mo.gov

Vonne Kilbourn, Editor II

(573) 751-1818
vonne.kilbourn@sos.mo.gov

Jennifer Alex Moore, Editor II

(573) 522-2593
jennifer.moore@sos.mo.gov

Tammy Winkelman, Administrative Aide III

(573) 751-4015
tammy.winkelman@sos.mo.gov